

TRANSFORMATIVE FAITH JOURNEY: A MODEL FOR HEALING
“PARALYSIS” OF SPIRIT, MIND, AND BODY
IN CHURCH COMMUNITY

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A FINAL DOCUMENT SUBMITTED TO
THE DOCTORAL STUDIES COMMITTEE
IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF DOCTOR OF MINISTRY

UNITED THEOLOGICAL SEMINARY
DAYTON, OHIO
December, 2003

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ABSTRACT

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by

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This project was designed to address the spiritual transforming faith journey of persons who have experienced a “paralysis” of spirit, mind, and body through life-altering crises at Cross Creek Community Church in Centerville, Ohio. The acknowledgment of a “paralysis” is the first movement toward healing. The methodologies used to achieve these goals were pretests, posttests, questionnaires, and qualitative research data. The project consisted of four ninety-minute sessions, which focused on renewed energy and change. At the conclusion of the four weeks, all the persons demonstrated an increased movement toward wholeness.

ACKNOWLEDGMENTS

I am grateful to my son, Daryl Tyrone Williams who challenged me to step outside of a world of grief and become a part of the community again. I thank Daryl for the encouragement to become “unstuck” and “unparalyzed” to the effects of trauma. The ability to always remind me he is the one who is paralyzed, only in body, not spirit and mind. I thank Daryl for his sense of humor during times of struggle, suffering, and pain, especially when learning how to transfer him on a “lift” from his chair to his bed. I thank Daryl for his undying strength to have a willing spirit to move forward with his education maintaining his manhood and personhood as a productive student and citizen. Daryl is challenging the prejudices against people with disabilities as he moves forth as an advocate of persons with disabilities at Wright State University and Miami Valley Hospital in Dayton, Ohio.

Daryl, you are a jewel. I applaud you in your steadfastness to become a graduate of the graduating class of June 2003, at Wright State University, Dayton, Ohio.

I thank my daughter, Nikole Joyce Williams for standing by her brother. Nikole, your poems of expressions of your soul’s longing for the care of not only your soul, but your brother’s, are words of undying love. The commitment you shared with your brother of unspoken words will echo for centuries in the lives of family members and others, generations to come. Your courage is a strength that is exemplified by the ancestral women of our family. The spirit of love and care of the ancestors will never leave you and Daryl.

I thank my granddaughter Aria and my grandson Scott for accepting Daryl, their uncle, into their lives as a quadriplegic. Aria and Scott, at very young ages you have become well educated and experienced in the medical field of caring for a person who has a severe disability. You have watched the process of a disability transformed into a committed ability to succeed. God has begun to shape your lives with compassion and empathy as you have helped to take care of Daryl.

I want to thank my granddaughter Diamond. You have loved your father with a deep committed love during this great challenge in your life. I love you.

I thank Dr. Clinton McNair who listened to my story of grief and “paralysis.” Dr. McNair, it was the compassion and belief I heard in your voice that helped me to know I could meet the challenges of the Doctor of Ministry Program in Pastoral Care and Counseling.

I thank Tonya Cummings of United Theological Seminary for supporting my faith journey and giving me words of encouragement and spiritual moments of strengthening my faith.

I want to acknowledge and give thanks to my friend, Carol Jenkins, nurse case manager and friend at Upper Valley Medical Center in Troy, Ohio. Only God could bless me with a friend like you as I find myself dying, in the midst of the program, from a double pulmonary embolism. Carol, you are a blessing to my life. I cherish our friendship.

I offer deep gratitude and appreciation for my peers who shared in special ways that will never be forgotten as we traveled this journey: Carolyn Buchanan-Reynolds, Linda Bruce, Beverly Daniels, Eunice Andrews, Barb SchwabKlaco, Mary Walker, Kenneth Davis, Ted Asfaw, Edward R. Knox, Wendell K. Rome, and Rich Stoglin.

I want to acknowledge and thank the participants of the project who entrusted their private lives into the hands of the writer. The willingness and openness to share your stories became stepping stones to healing and renewed energy as you embarked upon a spiritual faith journey toward wholeness. The participant's names are withheld to protect their privacy. God chose each of you for the journey to embrace new horizons. I will never forget the path we traveled together. Thank you again.

I wish to express my deepest heartfelt thanks to my context associates for their spiritual support and guidance while implementing and completing the project: Dick Duncan, Vivian and Ron Ekberg, Jan Loomis, Sue Voisard, and Terri Voisard. A special thank you to Terri Voisard who assisted during our group sessions and always took the time to ask, how are you coming along? Teri, your words were care to my soul.

Thank you for your patience and understanding to my professional associates: Rev. Dr. Mike Castle, Cross Creek Community Church. Pastor Castle was an inspiration, motivation, and caregiver to my spirit during the implementation of the project. A continued source and inspiration throughout the completion of the doctoral program: Rev. Dr. Richard Weir, Pastor New Bremen Community Church, New Bremen, Ohio. Pastor Weir was my seminary pastor. Miles can never separate us. You and your wife, Delza, will always be a part of my life. Your support has not only been through this project but through the seminary years and life altering crises: Rev. Dr. Donald Matthews, Ph.D., University of Kansas, Kansas City, Missouri, thank you for your spiritual support and guidance.

I want to acknowledge my deepest gratitude to my mentors Bobby Beavers and Urias Beverly. I appreciate your wisdom, encouragement, spiritual guidance, and insights,

which helped me to emerge deeper into the process of my being to actualize the life of the project, which is a replica of my life. My ancestors thank you!

A special thank you to Ted Baxendale who helped me to move through the “paralysis” of writer’s block and see of professional skills for the completion of this document.

Thank you to Rebecca Weaver who provided her professional technical typing skills for this document.

A sincere thanks and appreciation to Dr. Robert Hatch at the University of Florida, for the use of the “Spiritual Involvement and Beliefs Scale.”

Thank you to Margaret Kornfeld for the encouragement to take what is useful in the use of a solution focused method to help people cultivate wholeness in their lives through her writing of *Cultivating Wholeness*.

INTRODUCTION

The model of ministry addressed is the Transformative Faith Journey: A Model of Healing of “Paralysis” of Spirit, Mind, and Body in Church Community.

There exists in my spirit ancestors throughout generations of heritage who have helped to bring me to the place where I am today in my life. These persons have solely helped to generate spirits of cultivating wholeness in my personhood.

The creation of this model of ministry addresses the “paralysis” and suffering which has existed throughout people’s lives for many generations. The life of the project breathes healing for those who live today. Many persons are carrying pain and suffering psychologically, spiritually, economically, and environmentally of their family, friends, ancestors, and themselves.

The model addressed the sufferings of the participants in the hope of generating renewed energy, well-being, movement toward wholeness, and hope. The application is to create a model for healing “paralysis” of spirit, mind, and body from life-altering crisis in church and community through a spiritual transformative faith journey. The model can be used in agencies and institutions where persons are seeking wholeness and well-being.

The substance of the model is the Word of God causing enthusiasm around God’s healing power as individuals try to cooperate and move toward the cultivation of wholeness within themselves and the church community.

The project is built upon the yearning of the writer’s soul. The writer’s experience in the life of the church has created awareness of the needs of others whose souls yearn for

healing and renewed hope. The spirit, mind, body, and soul of the writer became “paralyzed” while watching the body of her young healthy son becomes paralyzed from a gunshot to his spine through an act of violence and robbery. The debilitating experience not only left her son, his parents, and siblings in trauma, but, a church family, community, and generations to come experienced a traumatic loss.

While studying in Africa, the mother /writer came to awareness that in tribal wisdom the mother who continues the birth of children continues a history of wisdom and spirit of ancestors to care for the soul. The ancestors’ spirits have continued to call out for the caring of the souls of this family and community. The care of the soul speaks to the longing of complicated and overwhelming grief.

In his book, *Care of the Soul*, Thomas Moore reveals the writings of the late Roman writer Apuleius, who said, “Everyone should know that you can’t live any other way than by cultivating the soul.”¹ The listening to the telling of stories, journal writing, and prayer are ways to begin cultivating the soul. These components along with faith, a belief system, support, and God’s love have helped to heal the hurt and pain and move toward wholeness and renewed hope.

The context for this project is Cross Creek Community United Church of Christ. Cross Creek Church is an open and affirming place of worship that is recognized and uplifted by the national and international body of the United Church of Christ, a place of worship that I have come to love and feel the presence of God. The strength of the church is its openness and spiritual presence. The challenge, as with the church of the 21st century, is to provide sacred space for individuals within the walls of the church as well as

¹ Thomas Moore, *Care of the Soul: A Guide For Cultivating Depth and Sacredness In Everyday Life* (New York: Harper Perennial, 1994).

the community to tell their traumatic stories and receive encouragement and help in movement toward healing and wholeness.

The church of the 21st century has been called to make a zestful paradigm shift. The church can no longer confine itself to the walls of its building where it has harbored God in a very small box. The church can no longer keep God contained in this box addressing the surface needs of the people. The paradigm shift of the church is to release God from the traditional church contained in the box to a more spiritually gratifying and welcoming place, so that a new generation of churched and un-churched individuals, all having the experience of trauma and loss, can feel they are on holy ground and in sacred space to tell their stories.

The process of movement in the ministry project would encounter consistent individual and or group (preferably group) meetings with pastoral leadership directing change and new perceptions. The ability of the pastoral leader to listen would create sacred space. The meetings would only need to take place for four to five week intervals. This time frame helps to focus, set goals, and begin to see movement with continued encouragement: to see God in the midst of suffering. The recognition of each individual's healing, which began before attending the meetings, would be actualized. The evidence of the occurring healing is festering like a smoldering fire in the soul of the individual. The soul is yearning for the existing fire of pain and hurt to be replaced with the fire of the Holy Spirit, a healing that rejoices in the joy of the Lord.

Today, the community and church are overwhelmed with grief and loss. Nations of people's spirits, minds, and bodies are being "paralyzed" with the effects of war, terrorism, and death. Babies, youth, parents, grandparents, sisters, brothers, husbands, and so many more are dying in the war of terrorism. The families and extended families of those who

died in the space shuttle explosion as well as the 9/11 terrorist attacks are seeking healing and wholeness. Those who are in the immediate life of the war and are able to survive it are seeking healing and wholeness. The children, spouses, and families of those in battle in the war are seeking understanding, healing, and wholeness. This is the season of time when the doors of the church should be open to help people experience and know God during suffering; to enable people to experience a liberated spirit that frees them from a “paralysis” of spirit, mind, and body; to create sacred space in the church to generate wholeness and renewed energy for people to experience God’s healing power.

The purpose of this project is to help people move toward and experience a spiritual change and renewing transformation of spirit, mind, and body from the paralyzing effects of traumatic life-altering crises. When the trauma is overwhelming, an individual can become anesthetized, experiencing a loss of the feelings of pain and grief. The individual experiences a state of shock.

The goal of the writer is to develop a ministry model that would provide sacred space for individuals to tell their stories of suffering and “paralysis.” The movement toward wholeness provides opportunities to experience the presence of God in the midst of suffering. But, most of all, it shows the movement of God in the lives of people as little miracles begin to happen, displaying change. The holiness of the sacred space is the creation of a calmness to induce movement from silence and “paralysis” to the telling of stories causing change from the paralyzing effects of trauma.

The methodology used in the project is pretest, posttests, and spiritual questionnaires. Insoo Kim Berg and Steve de Shazer, founders of the Brief Family Therapy Center in Milwaukee, Wisconsin, and their colleagues created the method used by

the writer. The assertion that “God is in the midst of our changing lives and God heals,”² are principles of grief counseling methods as discussed in the writings of Margaret Kornfeld in her book *Cultivating Wholeness*. Kornfeld’s book is used as a guide to care and counseling in faith communities addressing the stories and healing of people’s lives. The presence of divine leadership intervention with the guiding hand of God can generate a renewing energy toward healing, wholeness, and a life of wellness. Change will begin to take place in the attitudes of individuals with increased prayer time, inspiration, and motivation. The individual will begin to feel empowered as change happens in their life and the life of the church community.

The project observed and provided data demonstrating whether or not a renewed energy and change began to take place evoking a spiritual transforming journey of healing of “paralysis” of spirit, mind, and body. The project was evaluated through qualitative data analysis assessment and observation of persons through spiritual pre and post testing tools, group journal writing, storytelling, and individual verbal assessments.

Chapter One defines the area of ministry the model is addressing. It will address why this area of ministry was chosen and what spiritual insights the writer brings to bear on this ministry.

Chapter Two presents a narrative analysis of literature by other authors and writers and its relevance to the ministry model. The literature will focus on the area of specialization of the ministry model.

Chapter Three reveals and establishes historical, biblical, and theological foundations for the ministry model.

² Margaret Z. Kornfeld, *Cultivating Wholeness: A Guide to Care and Counseling in Faith Communities* (New York: Continuum, 2001), 6.

Chapter Four discuss the methodology and the design of the model to be used in the field experience. Other research methodologies will be presented.

Chapter Five provides a view of what happened during the actual implementation of the ministry model. The data collection methods used and the data analysis objectives will be discussed.

Chapter Six presents a summation, conclusion, and reflection of the writer from the field experience, a revelation of the success of the model, modifications, and whether or not transformation did take place for the participants and the writer.

CHAPTER ONE

MINISTRY FOCUS

In this ministry focus, the writer shall present the area of ministry the model is addressing, why this area of ministry was chosen, and special insights that bear on this ministry.

The writer shall present a description of her religious and spiritual beginnings, understanding of the church, present context, and synergy, which will set the context upon which the model used at the Cross Creek Community United Church of Christ, Dayton, Ohio was built.

The initial insights presented in this chapter originated in the writer's home town of Birmingham, Alabama. It was there she attended the First Baptist Church of Kingston and began her spiritual life journey. Since that time, the writer's theology has been enhanced by continued ecclesiastical training and systematically addressed through seminary and clinical pastoral education training.

The writer owes a tremendous amount of appreciation to her parents and spiritual mentor who recognized her spiritual gifts and provided spiritual support, moral support, and valuable guidance.

The aspired focus of the writer is a compassionate and inspiring study of the spiritual transforming faith journey of persons who experienced a “paralysis” of spirit, mind, and body through a life-altering crisis. The areas the writer will address are grief,

loss, pain and suffering, change, and snippets of miracles showing a renewed energy of the aspects of healing.

The “paralyzing” effect experienced from the crisis causes the individual to seek help and support from others. The embracing of faith and hope, together, become habits of practice. The perceptions of how things seem to be through the lens of a state of “paralysis” then begin to change welcoming in new meaning.

Spiritual Autobiography

Formative Years

The formative years of the writer’s life took place in Birmingham, Alabama. Birmingham is a well-known city that experienced intense racism, discrimination, segregation, and prejudice. Without insights and awareness or the lack of insights and awareness of that city, neither my theology nor personal development would be where they are today. The apparent racism, prejudice, and discrimination played a major role in the life of the community and church while inspiring my development as a member of the clergy.

The writer was born to the proud and loving parents, Robbie Lee Ivory and Land Merritt Dowdle. The writer and her siblings were blessed with a strong Christian foundation that was provided by their parents. The spiritual faith journey of the writer’s father was experienced through the African Methodist Episcopal Church. The spiritual faith journey of the writer’s mother was experienced through the Southern Baptist Church. The birth of the writer was embraced with holistic spiritual diversity.

The neighborhood in which the writer lived was identified as Kingston. This was a place where neighbors were very supportive of each other. The community church, First Baptist Church of Kingston, is where the writer was baptized and received the gift of the Holy Spirit. There, the writer began what she considered was a basis for her theological training. The writer served as Superintendent of the Sunday school, President of the Usher Board, Sunday School Teacher, and Baptist Training Union Convention Representative. The writer attended the Baptist Training Union meetings (BTU), Bible Study, and weekly prayer meetings. The experience of the writer living in a city filled with hate and segregation left the neighborhood community with limited choices of places to go. Therefore, the church was the place not only to worship, but to celebrate, to receive the grace and mercy of God, and to maintain hope in a time of intentional implications of hopelessness. The aura of this type of environment and atmosphere generated suppressed trauma and a life-altering crisis.

The life of the church, the communal togetherness of the neighborhood and family provided the support and faith built out of experiences that are “held in memory.”¹ Memory, love, and togetherness transformed an environment of crisis and hopelessness into loving memories of family, church, community, and hope. Attending church and becoming involved in the life of the church became a ritual. The opportunities in the church, the continuous meetings and gatherings, celebrations and spirit-filled worship were a way of life for the family. The writer experienced the church as a place which provided intense prayer, comfort, and inspired faith in the midst of great challenges. The essence of the church was filled with the Holy Spirit. If the writer had not experienced the church in

¹ Carol Ochs, *An Ascent to Joy: Transcending Deadness of Spirit*. (IN: Meyer-Stone, 1989), 10.

this vein, she would not have developed a concern for the edifying of the greater church. This is the church that reaches out to all people throughout the world bringing hope and healing. Ironically, the faith of the writer was not destroyed by fear when the impact of terror, a crisis, entered the doors of a neighboring congregation, bringing death to little children.

The Bombing of the Sixteenth Street Baptist Church

The writer remembers when the Civil Rights Movement was stronger than ever. Children in the community were walked to school by their parents. There was fear of violent acts directed toward them. Many of the writer's classmates were blasted with fire hoses and arrested by police for fighting against segregation. Other classmates and people from many communities were attacked by vicious dogs and taken away to jail. The writer's head hung in grief because she was not allowed to participate in the fight for justice for fear her father would lose his job. Many individuals were blackballed by the powers that be and not allowed to work in the state of Alabama if it were known that family members took part in the riots. These consequences would create another traumatic life-altering crisis.

For many years, the writer has grieved over this situation and experienced a loss causing a "paralysis" of spirit, mind, and body, which was suppressed. The writer did not realize the very foundation of her faith would be shaken beyond this point of grief.

The writer remembers the sound of the bomb in the far off distance. As a child, the writer could never have imagined that children were killed in the midst of the sound. Those that were filled with hatred had bombed the Sixteenth Street Baptist Church. The lives of little children were destroyed while attending the church services. The writer

remembers thinking it could have been her and other children in her church. The impact of this act upon the church was unbelievable. The church was created as a place of sanctuary for people. Yet, the very foundation was shaken. The most difficult question remains in the writer's heart: Where can people go to find a place of sanctuary that is greater than the church? The writer's sustained faith tells her there is no place greater than the church.

The threats of terrorism and bombings in the United States and the world remind the writer of the trauma of the bombing of the Sixteenth Street Baptist Church and the impact of a war of racism and segregation upon herself, classmates, and many others.

The 9/11 terrorist attacks, the space shuttle explosion, and the continuous threat and uncertainty of death, loss, and suffering plants seeds of grief in people's spirits, minds, and body evoking a "paralysis" state of being.

The experience and knowledge of trauma and grief from the past and present in the writer's life encourages sensitivity toward the needs of others. The perception, which occurs for the writer is that people need to know the church is open to hear their stories. The church is a place of welcoming, exhibiting fruits of the spirit of love, joy, peace, patience, kindness, generosity, faithfulness, gentleness and self-control, as revealed in Galatians 5:22-23:

By contrast the fruit of the spirit is love, joy, peace, and patience, kindness, generosity, faithfulness, gentleness, and self-control. There is no law against such things.²

² Galatians 5:22, 23 NRSV

The Fruits and Gifts of the Spirit

The writer's mother created the most beautiful and empowering act presented to the neighborhood in which she lived. The act was one that entailed the baking of fruitcakes at Christmas for many of the neighbors. This was an extension of the writer's mother's love for the church. The behavior and mannerisms she displayed were acts of kindness. The writer's mother displayed a belief of caring which helped people to feel better about themselves and find snippets of empowering energy. The writer's mother was not an ordained Pastor, but she took the foundation of the church into her heart and into the neighborhood. The power of listening to the stories of people was enhanced by the sharing of the fruitcakes she baked filled with fruits of the spirit.

The basic elements of the fruitcake were mixed in a large tin tub. They consisted of cherries picked from trees. This was a showing of reaching high to the glory of God. Oranges were peeled showing a display of peeling off life's trials and tribulations carried upon the soul. Apples were cut into small pieces, which exemplified God's creation of wisdom and love. There were many other ingredients that became metaphors for the fruits and gifts of the spirit to inspire humankind to come into the church. The people of the community's hearts and spirits were touched with the savory flavor of love, hope, and compassion.

The Death of the Writer's Parents and Its Significance in Her Religious and Spiritual Beginnings

The impact of the writer's parents' death was "paralyzing" to her spirit, mind, body, and soul. The parents she knew from birth to twenty-four years of age were no longer alive to inspire and motivate her. The spirit of the writer was tormented.

The death of the writer's mother occurred on March 10, 1970 during choir rehearsal at The Fifth Christian Disciples of Christ Church, Cleveland, Ohio. The writer's mother requested the choir to sing "Jesus Keep Me Near the Cross." During the singing of this song, the writer's mother closed her eyes and entered into the kingdom of God. The writer's mother died of a severe cerebral hemorrhage.

The death of the writer's father occurred on December 13, 1974 at the Holy Family Cancer Home, Cleveland, Ohio. The legacy left by the writer's parents was a spiritual Christian foundation of substance of the love of God. The foundation sustained the writer and drew her closer to God and the Church.

A New and Different Life

In the writing of *The Burning Bush*, words are given to us as a symbol of faith and the sign of action, "we must go down to the seashore to meet the shipwreck, we must go out into the streets towards those whom the rain has soaked and cold has paralyzed."³ These are words of encouragement to reach out to help others.

In May 1996, the writer was faced with another life-altering crisis. The writer's son became a victim of a crime so many people fear. He was robbed of two dollars, a watch and his class ring. He was shot and left to die by two young men. The bullet entered the spinal cord and he instantly lost the use of his body. He was paralyzed in body, mind, and spirit becoming a quadriplegic. The paralysis of his mind, spirit, and soul was challenged by his spiritual faith journey of baptism and the church. The writer's son's spiritual faith journey from a child gave him the strength and courage to maintain his sense

³ Lev Gillet, *The Burning Bush* (IL: Templegate, 1976), 57.

of personhood an identity. His college years at Pittsburgh Institute of Aeronautics in Pittsburgh, Pennsylvania and Tuskegee University in Tuskegee, Alabama were elements of motivation to aspire him toward a goal of survival. The “paralysis” of the writer’s son’s spirit, mind and body was renewed by the grace of God, prayer, love, support, and very special medical care. His spirit was continually sustained by his belief and faith in God. His body received renewed healing of movement and feelings. His desire was to be able to hug again. God heard the prayers of a broken and contrite heart. On August 9, 1996, the writer’s son was blessed with the healing of movement in his arms. A miracle had taken place. On June 14, 2003, the writer’s son graduated from Wright State University, Dayton, Ohio.

The “paralysis” of spirit, mind, and body the writer suffered as a mother was indescribable. The spirit of her son’s faith and her parents was the empowering strength that helped to sustain the writer’s faith. The church was not there for her. There were promises from the women’s group who never followed through.

The “paralysis” of spirit, mind, and body presented a life-altering change in the heart of the writer’s life as a mother. In retrospect, the unspoken question was, “how does the writer move forth with a quadriplegic son?” The larger picture of God’s plan was revealed at her son’s graduation.

God’s plan was for the writer’s son to help his mother move from the debilitating effects of a life-altering crisis. The only way this could take place was for her son to allow God to use him.

During her son’s graduation and minutes before the time for students to march in, God’s intervention took place. Along with another young man who had cerebral palsy, the writer’s son was told they would lead the graduating class of almost 2000 students

into the Nutter Convention Center for the ceremonies. When she saw the smile on his face and the rolling of his wheel chair as if he were walking, she became overwhelmed with tears of joy and gratefulness to God. The writer's son became a leader of persons with or without disabilities providing encouragement of hope that all things are possible with God.

Her son's greatest accomplishment was the encouragement he provided to his mother to move forth with a son who is a quadriplegic. God's plan was for the writer's son to help his mother to know his living was not in vain.

During the writer's "paralysis" of spirit, mind, and body, the writer was in the wilderness. She had to give honor to being a "mom" who watched her son suffer. She had to find God, the powerful healing God, while in the wilderness.

On June 14th, 2003, as the writer in amazement watched her son leading the graduating class at Wright State University in front of several thousand people, she began to feel alive again. There was a feeling of awesomeness. The feeling was one perhaps the people of Egypt felt as they watched the parting of the sea as Moses stood before them allowing God to use him.

The writer found God in the awesomeness of the reality of knowing this was the son who had suffered so traumatically, but had risen again. The renewed energy and regained intense feelings of hope displayed by my son helped me to see the miracle of God.

Summary

The renewed energy evoked memories of the intense training the writer had received in her formative years in the church. She realized how she had carried the church

in her heart. The writer realized how much the church had carried her on a sustaining spiritual faith journey. The writer realized the “paralysis” she had experienced through a divorce, the loss of her grandson’s father, and the loss of a baby, and the loss of a job. She had always viewed divine intervention from God in the lives of others, but never in her life. The life of the writer had become devoted to helping her son and family. The greatest insight of the writer was God’s revealing miracle of using the life of her son as a quadriplegic to help his mother heal from the “paralysis” of a life-altering crisis.

The value of loss becomes creative opportunities for living. Stanley Keleman writes: “Loss occurs . . . new space is created . . . the emotional reactions to loss and to space are experienced. New excitement is sensed . . . new possibilities are organized . . . new boundaries are formed.”⁴

The writer agrees with Keleman’s view of loss. The new space created is the essence of God’s presence in the midst of loss, grief and “paralysis” of spirit, mind, and body.

The different ways of experiencing new space was presented to the writer while attending Colgate Rochester, Bexley Hall, and Crozier Theological Seminary. A space was created through separation from her family to embrace a place of holiness with God. The power and sacredness of the space was unknown to the writer. The spiritual faith journey taken by the writer into the space was a demonstration of how faith endures. Faith was not grounded in the holy place, but “in holiness that transcends space.”⁵

⁴ Ochs, *Ascent to Joy*, 51.

⁵ *Ibid.*, 52.

Carol Ochs clarifies this development in the writings of *An Ascent to Joy*. She writes: “A space is created through separation, one that can be construed either as void or as a plenum, and in that ambiguity of interpretation there lies our freedom.”⁶ The wonderment of this revelation is the writer did not know upon graduation from seminary and graduate studies in Ghana and Egypt, Africa that her son would become a quadriplegic. The writer could not conceive that the space created in the separation from family was to be filled by a holiness that transcended her faith. The holiness lies in the transforming freedom experienced by the writer after watching a quadriplegic son graduate from college. The paralysis and obstacles had become achievements and healing of “paralysis” of spirit, mind, and body. Holiness belongs to God, who has the power to help people transcend beyond all obstacles.

Deep Sustenance

“It doesn’t interest me where or what or with whom you have studied.

I want to know what sustains you, from the inside, when all else falls away.”⁷

The Miry Clay

“He lifted me out of the miry pit, the slimy clay, and set my feet on a rock, steadied my legs. He put a new song into my mouth, a hymn to our God.”⁸

⁶ Ibid.

⁷ Oriah Mountain Dreamer, *The Invitation* (San Francisco, CA: Harper Collins, 1999), 114.

⁸ Psalm 40:3-4. NRSV

The Context

The Cross Creek Community Church is the context, which will be presented through its church history, theology, demographics and diversity.

Church History

The Cross Creek Community United Church of Christ manual provides a comprehensive history of the church.⁹ In May 1995, a core group of people from Miami Valley Community Church began to discuss the possibility of starting a new church. On January 11, 1995, the core group accepted a Pastor who came from a Southern Baptist Church, which he had founded in 1991.¹⁰

Following an invitation from some laypeople of First United Methodist Church of Dayton, the core group and pastor moved their church-starting efforts to First United Methodist Church. After the forming of this relationship in January 1996, the core group regrouped in an effort to return to the original vision of starting a new church in the suburbs south of Dayton.¹¹

After a very long meeting of reflection and prayer, the core group and pastor named this new church-starting effort “Cross Creek Community Church.” Later, it established an official relationship with the Alliance of Baptists.¹²

⁹ Cross Creek Community Church, United Church of Christ, Chronological History-Binding in Covenant Faithful People (Dayton, OH), 1999.1.

¹⁰ Ibid.

¹¹ Ibid.

¹² Ibid.

In April 1996, a dynamic meeting was held with the Southwest Ohio Northern Kentucky Association (SONKA) of the United Church of Christ and other local area U.C.C. churches, laypersons, and pastors. This meeting was a serendipitous occasion. After the meeting, Cross Creek was fully committed to being identified as a new church of the United Church of Christ.¹³

In November 1996, the St. John's United Church of Christ in Dayton to start Cross Creek Community Church calls Pastor Mike Castle. Upon receipt of this call, Pastor Mike Castle receives ordained ministerial standing in SONKA.¹⁴

May 2, 1998, the Southwest Ohio Northern Kentucky Association of the United Church of Christ unanimously approved Cross Creek for standing in the United Church of Christ.¹⁵

The United Church of Christ is supportive of all people and welcomes people of diverse cultures and religious traditions. The unity of the Church is not of its own making; it is a gift of God. Expressions of that unity are as diverse as there are in the Church.

Demographics and Diversity

The Cross Creek Community Church of faith has always been viewed as middle to upper class church. Cross Creek has a present membership of 250 with 200 active members. Community members have viewed Cross Creek as a place where mostly professional Euro-Americans attend. This is a perception and reputation that Cross Creek

¹³ Ibid., 1.

¹⁴ Ibid., 2.

¹⁵ Ibid.

is trying to change. Cross Creek would like to be known as a church of an authentic community as stated in the Constitution of the Cross Creek Community Church:

“We believe the church is a community where all people are welcomed and recognized as God’s good creation and where acceptance moves beyond mere toleration of differences and diversity to complete acceptance of all people believing that to be the way of Christ.”¹⁶

Cross Creek Community Church emphasizes the following distinctive value in all of its life and work:

We believe people of faith are to be included in the church’s membership, leadership, and ministries without regard to social labels. Therefore, we do not exclude or hinder people’s participation in the full life of the church based on, but not limited to gender, race, age, sexual orientation, socio-economic status, marital circumstance, ethnic origin, theological perspective, or physical/mental challenges.¹⁷

Cross Creek Church believes where there is diversity; there is God in the midst of the people. The majority of the church community is 70% heterosexual families. And there are the gay/ lesbian couples with children, heterosexual couples with children interracial couples with biracial children, children with disabilities, youth groups, the church nursery, and the female heterosexual Associate Pastor. The age range is broad from newborns to 80. A Sunday morning or Saturday evening worship service will consist of 70% Euro-Americans and a mixed 30% of African-American, Hispanic, Indian, and others. Cross Creek draws from a wide geographical range; North to Toledo, South to Kentucky, East

¹⁶ Constitution of the Cross Creek Community Church (Revised Edition, 1999), 2.

¹⁷ Ibid.

to Xenia, and West to Indiana. Cross Creek contains in its membership a group of seven pastors who assist in different capacities, as needed serving the church community.

Theological View

In her book, *Words Made Flesh*, Fran Ferder, describes the theological view which Cross Creek Community Church has engaged upon to communicate with the congregation and community, which the writer agrees with:

Through Moses, through Abram, Isaac and Jacob through Ruth, Judith and Esther, through the judges and kings, through Job, Isaiah and Jeremiah, through the prophets of later years, Yahweh communicated with the people and revealed more and more of the divine.¹⁸

The invitation continues for all to develop a deeper understanding and spiritual relationship with God, Ferder states:

Through Ruth there was a word on faithfulness. With Esther a message of courage. In Judith an expression of inner strength and sense of purpose. Job brought a new understanding of suffering and pain. Jeremiah reminded them that they were as clay in the hands of a potter-needing shaping and firing by Yahweh. Isaiah gave them a new vision and a renewed sense of hopes for tomorrow. Healing words. Grieving words. Challenging words. A word to console. A word to correct. A word to forgive. But always, a word.¹⁹

The authenticity of community in this context as relating to Ferder's words is the writer's desire to continuously help people experience healing and transformation in the ministry of Pastoral Care.

¹⁸ Fran Ferder, *Words Made Flesh: Scripture, Psychology and Human Communication* (Notre Dame, IN: Ave Maria Press, 1986), 22.

¹⁹ Ibid., 23.

William B. Oglesby, Jr., author of *Biblical Themes for Pastoral Care*, writes:

“. . . pastoral care can be defined as ‘bearing in one another’s burdens.’”²⁰ Oglesby continues, “. . . the bearing of burdens is not something done simply for others but with others . . . it is a process whereby we listen with gentleness and patience, speak with truth and love, hold out a hand in time of loneliness and fear, sit in silence through the long night watches, and rejoice when the shadow of distress is dissolved in the warm sun of deliverance.”²⁰

The intricate theological teachings at Cross Creek Church engage the congregation to have a mutual communication with their God and “energize one another and speak words true to their hearts.”²¹ Cross Creek Community Church conducts a spring and fall weekend intensive study for the church and community. The intensives have presented well-known theologians and scholars. These individuals offer new insights and fresh ways for Christian and Biblical faithfulness.

During Pastor Mike Castle’s spiritual journey of ministering to the needs of his flock a Doctor of Ministry degree was earned through Eden Theological Seminary in St. Louis, Missouri.

The demonstration of God’s love, grace, and mercy will continue through discovering and celebrating our God-given gifts and offering them in unselfish services. We, Cross Creek, will be servants of Jesus Christ in the world, extending the compassion, justice, peace and presence of Christ to all throughout the world.

²⁰ William Oglesby, *Biblical Themes for Pastoral Care* (Nashville: Abingdon, 1980), 2. Quoted in “History of the Council for Pastoral Education and Development, Inc.” Troy, Ohio: 1969.

²¹ *Ibid.*, 22.

Synergy

The pain the writer carried in her life for many years had already become unbearable when she moved to Dayton, Ohio. The move was to support her son as a quadriplegic student at Wright State University. The writer's faith was weak; her hope was almost gone. The writer asked herself how she would survive this journey. It had become suffocating. The journey of her life had been a prayerful one. Therefore, she prayed to God to provide her with a church home that was five minutes in proximity of arrival for the convenience of reaching her son if necessary. During this time, the writer decided to visit Cross Creek Community Church, which was fifteen minutes away. Upon entrance to Cross Creek she was received with a very spiritual and warm welcome. The writer could feel the presence of God in the worship service and the life of the church. The church was where the writer knew she wanted to stay. But, it was not the answer to her prayer in distance. After several visits, an announcement was made; Cross Creek would be moving to a new location. The location was exactly five minutes in travel. God had answered her prayer.

At this point, the writer knew the spirit of God had touched her heart, mind, body, and soul. The writer did not realize how much her spirit was touched until she began to experience the presence of the God in Cross Creek.

The writer was not aware of how much she tried to protect herself through "psychic numbing."²² The state of being was the "paralysis" of spirit, mind, and body experienced through the shock, pain and suffering of her son becoming a

²² Ochs, *Ascent to Joy*, 1.

quadriplegic combined with other losses. In the experience of suffering, the writer lost the “joy as well.”²³

At Cross Creek Church, the writer began to laugh, cry, and breathe again. The words of Fran Ferder describe the beginning of a spiritual transforming faith journey of healing which enfolds the life Synergy:

All of these ideas shared something in common. The fruit tree and the moon, the seas and the great winged birds, the woman and the man-brothers and sisters, sons and daughters of the God who breathed the same life source into each of them. All were connected at a most fundamental level by God’s own breath. God the breath-sharer.²⁴

The new insight was the experience of God breathing the breath of life into the writer’s spirit to reconnect with God through the shared common ideas and stories with sisters and brothers in the church. The beginning of the spiritual transforming faith journey was the reenergizing of the life source from others on the same accord with Jesus Christ, God, and the Holy Spirit.

The “paralysis” and disarray in the life of the writer waited for a breath, God’s breath, that would waken in to new life.

Poetic Hebrew images provide a framework connecting synergism to human communication and conditions in a biblical sense: “In the beginning, God’s spirit hovered over the water. In the beginning, God reached out with a breath of encouragement to all that was bleak and helpless. In the beginning, God uttered words that gave energy and life. In the beginning, God communicated.”²⁵

²³ Ibid.

²⁴ Ferder, *Words Made Flesh*, 17.

²⁵ Ibid., 20.

The greatest insight of the writer was, why there was a need to provide a plan for faith communities, to focus on the care of individuals who experience a “paralysis” of spirit, mind and body through life-altering crisis of pain. Why had the plan become a passion that would not dissipate?

The answer to the question of why there is a need is often ignored or overlooked. The heart of the matter is that the church is called to reach out with a breath of spiritual encouragement, as God did. The individual needs to have the support of others to help them reconnect to wholeness and well-being. God is a God of compassion. The compassion given to the writer comes from God.

The person experiencing the “paralysis” is confronted with shock and disbelief that they are faced with a loss, which takes away normal everyday functions of their life. They become vulnerable and helpless. There becomes a need to depend upon others for support. They lose friends, acquaintances, jobs, and relationships. They are faced with hopelessness and rejection. The many losses in the life of the writer often left her with feelings of helplessness, a shaken faith, anger, and disbelief which evolved unknowingly into a greater depth of spirituality and transformation, which was waiting to be known. God present in the life of the writer as a child and adult in the church heard the humbled prayers of a broken-spirit of the writer.

The writer asked herself why there was an intense passion to set forth a plan for faith communities to help others who are in a state of “paralysis” and her inner voice spoke to her saying: “Without the communication, which took place with God, healing would not have begun to take place. Without the interaction with sisters and brothers in the faith community, there would not have been a sharing of common ideas for all to be on one accord.”

The writer's hope has been to help faith communities become aware of their importance as an extension of Jesus Christ in reaching out to those who are affected by life-altering crises. The plan is to help the faith community realize the need to create sacred space for individuals to tell their traumatic stories and receive spiritual encouragement, renewed energy, and the opportunity to breathe in new life. When our lives most reflect the sacred pattern that brought us into being, perhaps then we are "closest to the holy, and therefore, the most holy."²⁶

The writer experienced the life synergy as the transforming of the interconnectedness of the spirit, mind, and body. Experiencing a state of "paralysis" was embellished in the spiritual transforming faith journey through the reconnecting with sisters and brothers in the life of the church intertwining new ideas, faith stories and creating common grounds. God is the source that reconnects.

The desire to make a difference in people's lives is an extension of the writer's renewing experience. Therefore, the writer's hope is to move forward in doing ministry within the faith community to help people experience new life, change, and spiritual transformation from life altering crises.

The writer could never have imagined what the experience of renewal and transformation could feel like without experiencing it. The joy of a miracle is mysterious when the release and letting go of pain takes place without the individual actually initiating it himself or herself. The test of the writer's faith evolved into the transforming of her total being as she experienced the mystery of the miracle.

²⁶ Ibid., 19.

The miracle for the writer was the surviving of a near death experience during her clinical pastoral education residency at Upper Valley Medical Center located in Troy, Ohio, on June 18th, 2003. The writer had begun to have symptoms of an asthma attack and was immediately rushed to the emergency room. The symptoms began to get worse and the writer experienced feelings of pain on the right side of her chest. The intern who was assigned to the emergency room for a very short period of time was called to the care of the writer. The intern overheard the writer say she had pain. He told the doctors present that he would like to follow up on a “hunch” about the pain and have a particular test done on the writer. At this time, the writer was not aware that the test was a lung scan. The writer was sinking more into a serious stage of near death, unknown even to the doctors. They thought they were treating her for an asthma attack. The test results immediately showed the writer had experienced a double pulmonary embolism with no possible return to a life of living. She was immediately told that she was dying. She was told the doctors could not understand how she was not already dead. The impact had been so traumatic. She was told it was only God who could keep her alive and the doctors would do every thing they could, except they could not promise her she would live through the next hour or the night. The doctors were most compassionate and advised the writer who was a chaplain, mother, sister, and daughter that it was time to call her family and pastor. The writer’s pastor and children came to say their last “goodbyes.” The writer unconsciously had let go of pain and suffering and loss and grief and “paralysis” for there would be no more. The writer did not actualize the mystery of this miracle until she began to realize that it was by the grace and mercy and power of God within the sacred space of their relationship that she was actually alive and living again. The renewed energy and

movement toward wholeness and well-being had taken place. The writer does acknowledge the miracle comes in different ways.

CHAPTER TWO

THE STATE OF THE ART IN THIS MINISTRY MODEL

In this chapter, the writer shall attempt to demonstrate familiarity with the literature related to the ministry model including relevant concepts and models of ministry. There are other authors and writers who address the writer's area of ministry focus.

Rabbi Harold Kushner, the author of *Why Do Bad Things Happen to Good People*, has written a new book, entitled *Living a Life that Matters*. Toward the end of this book, he writes,

When Martin Buber, the great Jewish Philosopher and theologian, was asked, "Where is God?" he was wise enough not to give the cliché answers: God is everywhere; God is found in churches and synagogues. Buber would answer that God is found in relationships, God is not found in people, God is found between people. When you and I are truly attuned to each other, God comes down and fills the space between us so that we are connected, not separated.¹

During the implementation of the project, the writer experienced God's connection between people as they interacted and supported each other through tears and concern for the other. The expressions of compassion and concern toward each other were experienced through listening to the telling of stories, while observing the reactions of each other.

The creation of sacred space in the model allowed participants to hopefully experience the presence of God. This can be a dramatic and emotional event. Participants

¹ *The Journal of Pastoral Care Counseling* (Spring 2002), Vo. 56, No.1

have the opportunity to connect with not only their feelings of the effects of crisis but with those of others. Relationships are created which generate renewed feelings of hope in the presence of God.

At the heart of a transformative faith journey: a model for healing “paralysis” of spirit, mind, and body in church and community is transformation. Individuals are looking to see where change can take place. The clergy who are embracing the process of pastoral care are encouraged to do something uniquely different which is suited for persons suffering from life-altering crises.

Cultivation of Wholeness

Margaret Kornfeld’s *Cultivating Wholeness: A Guide to Care and Counseling in Faith Communities* addresses the different ways in which the cultivation of wholeness relates to the Solution-Focused Method by Peter De Jong and Insoo Kim Berg in *Interviewing for Solutions*. Kornfeld identifies that people need each other and that people are whole. She further associates that mind, body, psyche, and spirit are integrated in that wholeness. As people develop and grow in ways which bring new insights to their living, they realize the positive ways in which they are connected to others and society. In faith communities, there is a need for clergy to “learn some brief therapy methods in order to help members deal with their life issues and life-altering crises.”² The key to this method, as described by Kornfeld, is one which generates active hope [renewed energy]. Kornfeld describes it through the words of Emily Dickinson, “Hope is the thing with feathers. Hope, like a bird, is active, in flight and expecting to be upheld by the air: held by the everlasting

² Margaret Kornfeld, *Cultivating Wholeness: A Guide to Care and Counseling in Faith Communities* (New York: Continuum, 2001), 139.

arms of God.”³ It is this sense, as Kornfeld continues, “of being supported” that many clergy and members feel when solutions, change, and transformation happen before they are recognized.⁴ The clergy is not the healer. God is the healer. The desires of the heart are “for eyes to see the changes that are happening;” experience the “support in the hard work of doing something different;” and the evoking of “trust in that support” in order to feel God’s love and snippets of change and transformation.⁵

African American Pastoral Care

Edward P. Wimberly’s, *African American Pastoral Care*, reveals the major role of the African American pastor in the crises of life-altering situations. The role is to “bring the resources of the support system to bear upon the emotional and interpersonal needs of individuals.”⁶ The narrative approach of telling stories within support groups lends itself well to helping members of the church community who have faced life-altering transitions as crises. The narrative encourages relationships with others and God stimulating the need to give attention to one’s spiritual life.

Wimberly provides continued discernment to the ideology of the model proposed by the writer in a conceptual model for pastoral care. The focus of the model is “on stories that come spontaneously to the mind of the pastor at the actual point of encounter with

³ Emily Dickinson, *The Complete Poems of Emily Dickinson*, 116, quoted in Kornfeld, *Cultivating Wholeness*, 142.

⁴ Kornfeld, *Cultivating Wholeness*, 143.

⁵ Ibid.

⁶ Edward P. Wimberly, *African American Pastoral Care* (Nashville, TN: Abingdon Press, 1991), 46.

the people in need.”⁷ These stories revealed and identified a spiritual connection to the person’s life. The goal is to help the individual cooperate with what God is doing to bring healing and wholeness. The emphasis is placed upon crises that people encounter throughout life. The role of the pastor, as Wimberly describes, has been: “helping those in crises understand what they are experiencing, facilitating, the expression of feelings, attend to the person’s story, find ways to impact the crises,” and to help discern and attend to the faith story at work in their lives.”⁸ These steps, as described by Wimberly, are a correlation to the five-step solution focused model.

Wimberly identifies the African American oral culture as one that has always used sharing stories in caring situations. This will remain a dominant approach in the African American church. “That is to say, the storytelling approach relies heavily on the intuitive and imaginative capacities of the pastor.”⁹ Oral cultures emphasize story telling, story listening, relationships, and celebration. Wimberly says, “the emphasis has been on telling stories that emerge as a result of what people are saying” about their lives.¹⁰ The pastor connects the personal stories to those from the Bible generating an emergence “because of something being experienced by those in need.”¹¹ An emergence of renewed energy takes place. A change to spiritual perceptions enhances healing.

The writer’s ministry model is one that can be used for people throughout the world. Although the writer references the writings of Wimberly in the African American

⁷ Ibid., 95.

⁸ Ibid., 65.

⁹ Ibid., 94.

¹⁰Ibid.

¹¹ Ibid., 95.

church, it does not mean the ideology is limited to African Americans. The world today has become a world of diversity in many communities. The opportunity for pastors of any culture is available to reach out and help individuals to experience wholeness. The blessing of this project is that pain and suffering does not discriminate. The writer acknowledges that cultural differences may impact how individuals respond to achieving spiritual wholeness. The renewing of energy brings about healing of “paralysis” of spirit, mind, and body, through the telling and listening of the story. The renewing of energy generates new hope. A newness of hope evolves into change, new perception, and transformation.

Health Care Today

Health Care Today, written by Carol Judge, sponsored by Good Samaritan Hospital, Dayton, Ohio provides opportunities for those experiencing a physical paralysis of body to share their stories of healing of “paralysis” of spirit, mind, and body through a life-altering crisis. These stories exemplify the intense need, support, and dependence upon others in a physically paralyzed person:

A reunion of spinal cord injury survivors gather to share stories and offer encouragement: “At many reunions everyone is interested in what happened to the person voted Most Likely to Succeed. At the Rehabilitation Institute of Ohio’s (RIO) Annual Reunion for Spinal Cord Patients, every returning graduate seemed to feel he or she had at sometime been voted most likely to Succeed by the physicians, chaplain, and other staff members on the medical team.”¹²

¹² Carol Judge for “Health Care Today”, May/June 2002, http://www.Daytonclassifieds.com/classifieds/employment/HCT/0502_feature3.html(5/6/2003), 1.

Judge continues with the surviving stories: “Based at Miami Valley Hospital RIO holds a yearly reunion that includes food, live entertainment and a panel discussion with spinal cord injury survivors. Guest speakers are invited to share their personal success stories with other patients who may have been injured more recently. The knowledge and support they impart is persuasive and meaningful.”¹³ As one particular spinal cord injured guest was overheard saying, “It’s coming from someone in a wheelchair, too.”¹⁴

Daryl, the writer’s son, “with the encouragement of the RIO staff and physicians initiated the spinal cord support group, CHOICES, which meets monthly at the hospital. Williams, who gives encouragement to newly injured patients about accentuating the positive, says, “Getting groups together to talk about our experiences is wonderful because you don’t always know what to expect or what to do.”¹⁵

The focus of the RIO and the Miami Valley Support Group is one that negotiates well-formed treatment goals beginning treatment with the end in mind as described in the Solution-Focused Method by the writer. The method is designed to help persons experiencing a “paralysis” of spirit, mind, and body with no prejudice toward disabilities. The writer’s experience with medical doctors during the onset of her son’s physical paralysis provided an initial change of perception, the physician said, “Your son today is preparing for going home, to begin living his life. The method of healing is to create renewed spiritual healing and change” and that was done. The storytelling of others, the pastoral care of the writer’s chaplaincy supervisor at Cleveland Clinic Foundation, prayers, supportive relationships that were established, and emphatic listening created a pathway

¹³ Ibid.

¹⁴ Ibid.

¹⁵ Ibid., 2.

for transformation. The smallest signs of miracles began to take place. The writer's son began to move his arms after having been told he would never have movement of his body again. The increased hope generated from the movement evoked new perceptions and change spiritually. The new movement in a physical state of being paralyzed is parallel to new movement in a state of "paralysis" of spirit, mind, and body. Both states of persons are being regenerated and renewed experiencing new energy and hope.

There's a lot of heart at Miami Valley Hospital and the RIO center that works to make the difference for persons to appreciate love, themselves, and others. Miami Valley Hospital staff helps persons create renewed energy, change, new perceptions and transformation not only for the physical paralysis but the "paralysis" of spirit, mind, and body, through a life altering crises.

The Healing Wisdom of Africa

Malidoma Patrice Somé describes the communal process of addressing and recognizing the grief ["paralysis"] process that evolves within the writer's model among the participants. The model of communal grief [paralysis] ritual addresses the success of the water ritual:[a water ritual was used in the implementation of the writer's model]

The "paralysis" of spirit, mind, and body is embraced by grief. Grief is a community problem because the person who is sick belongs to the entire community. Let us then go to a ritual involving someone who is struggling with some serious loss. The central water element here is tears, because we are talking about loss. The group would come together, forming a village to help him or her heal from the loss by going together into the person's grief. The responsibility of this village is to show the person that her or his loss is a loss for the entire community, [relationship established between sharing of stories]. The success of the water ritual is ensured by the presence of intense, focused attention [eventually evoking tears and bringing clarity from the release of tears]. At the core of the ritual is the person communicating to the village [support group] the story of

his or her loss. The person's story or loss triggers a variety of spoken responses, with each response reemphasizing the story told by the person. The response from one person will come in the form of a question directed at Spirit [God]. Another one will confirm that the burning [hurt] still continues inside. One after another, people will expand stretching the loss of the one into the loss of many. After deplored the loss and the "paralysis" that it produces, the villagers must each speak about something in the person that is irreplaceable to the community. Every statement is punctuated with spontaneous collective grieving" [causing the group and individual to move forward toward change].¹⁶

Malidoma reveals,

The philosophy behind this is that visibility and recognition are sources of empowerment while anonymity leads to self-doubt and loss of spirit. People need to hear good things about themselves told to them with sincerity, honesty, and integrity. There is a force in this that allows the person to thrive. There is nothing like being seen within this kind of light. The healing comes when the sick energy that grows in the darkness of isolation becomes upset by such intense recognition. Grief does not come on demand. It is something that must be evoked through stories and images. Before telling the stories of grief ["paralysis"], each small group first makes a prayer to the Spirit requesting its presence to help pluck out that which causes tension, "paralysis", and distress.¹⁷

Spiritual Rx: Prescriptions for living a Meaningful Life

Frederic and Mary Ann Brussat, in *Spiritual Rx*, provide prescriptions for the spiritual life. Frederic is a United Church of Christ clergyman with a journalism ministry. The path of practice of the spiritual journey as described by the Brussats begins with "The word "prescription," abbreviated as "Rx," which has some interesting associations when applied to the spiritual life. As in medicine, a prescription can be a cure, remedy, or solution recommended to correct a disorder, imbalance or problem. It can take the form of

¹⁶ Malidoma Patrice Some, *The Healing Wisdom of Africa: Finding Life Purpose Through Nature, Ritual and Community* (New York: Penguin Putnam, 1998), 221.

¹⁷ Ibid., 223.

advice or information, which in spirituality is called wisdom. This meaning can be extended to include a spiritual rule or a set of activities undertaken as part of one's daily discipline. This book, *Spiritual Rx*, then consists of remedies, wisdom, and recommended activities for all those taking up the spiritual life.”¹⁸

The transformative faith journey of healing of “paralysis” of spirit, mind and body is interwoven with the path of practice identified by the Brussats:

Practice has always been the heart and soul of the world’s religions and it is also the distinguishing characteristic of today’s less organized spirituality movements. It can be something as simple as lighting a candle or a ritual as complex as a Native American vision quest. It can involve the spontaneity of a Christian’s prayers in the street or the rigorous structure of a Muslim’s five-times-a-day prayer. A person’s daily practice might include elements of ethical training, emotional transformation, motivational change, community building, study of sacred texts, and acts of service.¹⁹

Martin Marty and Micah Marty, in *When True Simplicity is Gained: Finding Spiritual Clarity in a Complex World*, are teachers of “the wedding of beauty and simplicity. Micah Marty, a photographer, recommends that we approach our lives using the methodology of his craft: Focus on what is important and remove superfluous clutter. To demonstrate, he presents some stunning photographs taken at Shaker Village of Pleasant Hill, Kentucky. Here members of this nineteenth-century movement sought to live the ideal of a simple, God-centered life. “Beauty is reflected in pictures of a stair case, wool in a basket, a mixing bowl, and many other objects.”²⁰ A naturally-shaped stone and

¹⁸ Frederic Brussat and Mary Ann Brussat, *Spiritual Rx: Prescriptions for Living A Meaningful Life* (New York: Hyperion, 2000), i.

¹⁹ Ibid.

²⁰ Ibid., 38.

a wooden , spiral carved box from India is used in the implementation of the writer’s ministry model.

A historian of religion, Martin Marty, “provides meditations to complement the photographs reminding us that simplicity is not a commodity to buy or a system to learn but a profound spirituality rooted in community and God. The 40 brief essays are each linked to a scriptural passage and unfold in response to a classic prayer by John Wesley, Jakob Bohme, Therese of Lisieux, Reinhold Niebuhr, Elizabeth Seton, George Fox, and others.”²¹

Marty suggests that we read each meditation title as the completion of the statement “When true simplicity is gained, it brings with it . . .” We fill in focus, repose, freedom, dazzlement, priority, sufficiency, perspective, reordering, direction, and more [change, new perceptions, and transformation]. Those who appreciate simplicity, he writes, “bring the beauty of the sacred into ordinary life and ordinary concerns into the holy place.”²²

Within the holy place, the writer finds a transformative faith journey exemplifying a model for healing “paralysis” of spirit, mind and body in the ordinary life and concerns of others.

²¹ Ibid.

²² Ibid.

CHAPTER THREE

THEORETICAL FOUNDATION

The purpose of this chapter is to review pertinent historical, biblical, and theological foundations for the model being presented.

No minister can save anyone. He or she can only offer themselves as a guide to fearful people. Yet, paradoxically, it is precisely in this guidance that the first signs of hope become visible. This is so because a shared pain is no longer “paralyzing” but mobilizing when understood as a way to liberation. When we become aware that we do not have to escape our pains, but that we can mobilize them into a common search for life, those very pains are transformed from expressions of despair into songs of hope.¹

A Historical Analysis of Pastoral Care in the Church

Over sixty years ago, the American pastoral counseling movement began providing training to clergy to counsel more effectively in their congregations. The movement has contributed to “holism.”² During this time, pastoral counseling has evolved into a profession identifying that psychological healing is rooted in spiritual principles. Martin Buber, Jewish mystic and scholar, through his spiritual investigations, was seeking to understand the relationship between God and ourselves with each other. In Buber’s classic work, *I and Thou*, he reveals “Through our relationship to God, we are connected to each

¹ Henri J. M. Nouwen, *The Wounded Healer* (New York: Doubleday, 1979), 95.

² Kornfeld, *Cultivating Wholeness*, 6.

other, and that we need community that supports us as we dwell in time and space.”³ The writer identified in the ministry model the importance of community in people’s lives who have suffered from a “paralysis” of spirit, mind, and body in life-altering crises. A spiritual principle rooted in Pastoral Care and Counseling is the entity by which the writer connected the creation of the spiritual model to the church community.

In the book, *Human Medicine*, written by James B. Nelson and Jo Anne Smith Robricht, is provided a view of earlier cultures that focused on the integration of body, mind, and spirit. The viewpoints of Nelson and Robricht are provided in the context of medicine and religion historically. The views of these writers are historically presented:

A cursory glance back toward ancient Samaria, Egypt, Babylonia, Greece, Persia, and Rome reveals a strikingly similar phenomenon: medicine and religion belonged together. The human being was viewed as a unity, mind and spirit. Most often the priest and the physician were one person.

Similarly, for the Hebrew, body and spirit could not be divorced, and hence the notion of salvation of the soul or the spirit apart from the body was foreign. Even so, early portions of the Old Testament frequently separated the notion of salvation from that of health. Later Old Testament writings showed a gradual convergence of the two notions, a convergence which continued through the synoptic accounts (Matthew, Mark, and Luke) of the New Testament.⁴

The writings of James N. Lapsley in *Salvation and Health*, in connection with the writing’s of Nelson and Rohricht reveal “In other New Testament writings, however, salvation took on specialized meanings that were not directly related to health.”⁵

³ Martin Buber, *I and Thou* Translated by R. Gregory Smith (New York: Charles Scribners Sons, 1958), 45-46. Quoted in Kornfeld, *Cultivating Wholeness*, 6.

⁴ James B. Nelson and JoAnne Smith Rohricht, *Human Medicine: Ethical Perspectives on Today’s Medical Issues* (Minneapolis, MN: Augsburg, 1984), 16.

⁵ James N. Lapsley, *Salvation and Health* (Philadelphia, PA: Westminster Press, 1972), 38, quoted in Nelson and Rohricht, *Human Medicine*, 16.

The continuation of a cursory glance at the historical views by Nelson and Rohricht revealed further insight into the ministry model:

In spite of a continued interest in certain forms of healing the church persisted in the separation of salvation and health. In a variety of ways the formative theological giants spiritualized salvation to the consequent denigration of the physical body. In the early Middle Ages Augustine's Neoplatonic dualism led him to see the body as the prison house of the soul. In the High Middle Ages Thomas Aquinas built an Aristotelian philosophy which viewed the body as significant for spiritual development but clearly inferior to the spirit. In the church of the first few centuries healing gradually became less the ministry of a few people and more a ministry of the whole church. Institutionalization took place. The Order of Deaconesses, the Order of Widows, and the Order of Virgins were established for healing purposes. In spite of Christian concern for the ill body-spirit dualism has persisted into the modern period.⁶

In his writings, *Basic Types of Pastoral Care and Counseling*, Howard Clinebell provides historical insight of Pastoral Care and Counseling for the church community healing "paralysis" generating renewal of persons, Clinebell says, "An effective care and counseling program, in which both minister and trained lay persons serve as enablers of healing and growth, can transform the interpersonal climate of a congregation, making a church a place where wholeness is nurtured in persons throughout the life cycle."⁷

The message expressed by Clinebell is the objective of the ministry model.

Clinebell further notes:

Pastoral Care and Counseling or [formed groups in sacred space] contribute to the continuing renewal of a church's vitality by providing instruments for the renewal of persons, relationships, and groups. By reducing the cripple - ness of our ability to give and receive love, counseling, [or formed groups in sacred spaces] can help us to be the church-community in which God's love becomes an experienced reality in relationships. Thus, counseling is an

⁶ Ibid., 16-17.

⁷ Howard Clinebell, *Basic Types of Pastoral Care and Counseling: Resources for the Ministry of Healing and Growth* (Nashville, TN: Abingdon Press, 1984), 14-15.

instrument of continuing renewal through reconciliation. It can create windows of new awareness [perceptions], restoring sight [spirit] to eyes previously blinded [“paralysis”] by our anxious, guilt-ridden self-concern-to the beauty, tragedy, wonder, and pain all about us.⁸

Clinebell further denotes a challenge to our period of history:

Pastoral counseling [formed group in sacred spaces] and care can be instruments of healing and growth by helping us develop what is most difficult to achieve in our period of history-depth relationships. Most of us can identify with the pain of the minister who said to his psychotherapists, “My life is characterized by a plethora of contacts and poverty of relationships.” This is the common blight that threatens the creativity of each of us in our touch-and-run cultures-a culture oriented toward interpersonal superficiality. This is the blight that indicates against the continuing rebirth of a church as a redemptive social organism, preventing it from becoming a place where persons experience transformation. It is far from easy to relate to the depths of other persons. To do so is to come alive to their personhood-to their pain and potential, their emptiness or fullness, their unique blend of hope and despair. It is painful to relate to the depths of others because it inevitably exposes us to the dark rooms of our own inner world. Their emptiness reminds us of our wounds. Their anger and guilt causes ours to resonate. Yet only as we relate to others in depth can we become growth-enablers in their lives. Only those who have discovered new life in their own depths can become spiritual obstetricians, aiding the birth [change, new perceptions, and transformation] of new life in individuals and in the church.⁹

The writer discovered new life in her depths becoming a spiritual vessel with others who have become growth-enablers. Without the King James Bible and its healing literary words, the New Revised Standard Version Bible exemplifying the Psalms, and many, many prayers generating the essence of humbleness, humility, and vulnerability the renewed energy would have difficulty in surfacing.

⁸ Ibid.

⁹ Ibid.

Biblical Analysis

The reality of human suffering is expressed in Psalms 102:1-7. It denotes the harsh reality of human existence in suffering.

Hear my prayer, O Lord; let my cry come to you. Do not hide your face from time in the day of my distress. Incline your ear to me; Answer me speedily in the day when I call. For my days pass away like smoke, and my bones burn like a furnace. My heart is stricken and withered like grass; I am too wasted to eat my bread. Because of my loud groaning my bones cling to my skin. I am like an owl of the wilderness, like a little owl of the waste places. I lie awake; I am like a lonely bird on the house top.¹⁰

“Biblical faith is a confession of the reality of human suffering throughout the world. Biblical faith does not use pretty words. It does not describe life’s sufferings or words used in fairy tales. One of the foremost characteristics of the faith of the people of Israel is the forthright nature of its language, which depicts mourning and loss.”¹¹

In his writing, *God and Human Suffering*, John Hall Douglas brings to view, “The biblical scriptures reveal the suffering of the Israelites and the Lord’s knowledge of their suffering as revealed in Exodus 3:7. It reads:

Then the Lord said, “I have observed the misery of my people who are in Egypt; I have heard their cry on account of their task makers. Indeed, I know their suffering.”¹²

The Exodus scriptures of suffering not only speak to the Israelites, it speaks to people who are suffering from a paralysis of spirit, mind and body today from life-altering crises. The Israelites believed one day God would deliver them from their suffering. The

¹⁰ Psalms 102:1-7 NRSV

¹¹ John Hall Douglas, *God and Human Suffering: An exercise in Theology of the Cross* (Minneapolis, MN: Augsburg Publishing House, 1986), 32.

¹² Exodus 3:7 NRSV

focus of the ministry model was to guide people in knowing God would deliver them from their suffering. This was revealed in the book of Exodus 3:17.

I declare that I will bring you up out of the misery of Egypt, to the land of the Canaanites, the Hittites, the Amorites, to a land flowing with milk and honey.¹³

The scriptures lift up the intensity and directness of the suffering of people. The faith of the Israelites does not beat around the bush. The message is clear: The people are hurting and suffering! The Israelites were seeking a connection to God through someone on earth whom God had chosen to help them in their healing of broken spirits. God sent Moses. God empowered Moses through the sufferings of Jesus that connected him spiritually with those who are suffering. The story of Moses and the Israelites is a continuing metaphor for people who are experiencing feelings of hopelessness loss, desired change and transformation.

The writer created the ministry model to help people find hope, peace, love, joy, forgiveness, and healing in the midst of suffering. The encouragement from others is what helps to bring hope into one's life. The pastoral leader is present for those suffering in the ministry model as Moses was there for the Israelites. When life seems hopeless, it sometimes becomes difficult to find a sense of meaning.

In Paul's letter to the Romans he reveals the hope and faith found in God's love, Romans 5:2-5:

Through whom we have obtained access to this grace in which we stand" and we boast in our hope of sharing the glory of God. And not only that, but we also boast in our sufferings, knowing that suffering produces endurance, and endurance produces character, and character produces hope, and hope does not disappoint us,

¹³ Exodus 3:17 NRSV

because God's love has been poured into our hearts through the Holy Spirit that has been given to us.¹⁴

The scriptures speak boldly to the power of the results of healing. The idiom speaks to the all-knowing God who is present in the midst of suffering. The idea is to help God who is present in the midst of suffering. The idea is to help people suffering "paralysis" of spirit, mind, and body to change their perceptions to knowing that God is present.

The *New Revised Standard Version Bible* reveals in Hebrews an in-depth expression of hope and articulates the faith journey, which leads to trust in God.

Now faith is the assurance of things hoped for, the conviction of things not seen. Indeed, by faith our ancestors received approval. By faith we understand that the worlds were prepared by the works of God, so that what is seen was made from things that are not visible.¹⁵

The scripture speaks to the soul of the writer. The hope instilled in the writer from a Christian heritage evolved through sufferings, which produced endurance. The endurance produced character, which evolved into pastoral leadership evoking a desire to help others heal and realize their endurance.

The writings of Margaret Kornfeld, continue to reveal the teachings of Jesus in helping people who are feeling hopelessness—a "paralysis" of spirit, mind, and body. The revelation is, "Jesus frequently tried to help people change their attitudes about worry and anxiety. Some people in his day, like those in ours, believed that worrying does some good. These people convey a message: "When I'm worrying, I'm really working on your

¹⁴ Romans 5:2-5 NRSV

¹⁵ Hebrew 11:1-3 NRSV

behalf.” Jesus taught that worry does not accomplish anything.”¹⁶ The scriptures, Luke 12:22-25, reveal the words of Jesus as he tries to provide comfort and guidance in healing:

Therefore I tell you, do not worry about your life, what you will eat, or about your body, what you will wear. For life is more than food, and the body more than clothing. Consider the ravens: they neither sow nor reap, they have neither storehouse nor barn, and yet God feeds them. Of how much more value are you than the birds! And can any of you by worrying add a single hour to our span of life.¹⁷

Kornfeld’s writings continue to reveal: “Modern scientists have identified the trauma of loss as being a central factor in the creation of the stress syndrome that then fuels worry and anxiety [causing paralysis of spirit, mind, and body through a life-altering crisis].”¹⁸ It was evident that Jesus understood this. Jesus helped to heal people by helping them attach themselves to a loving God—“a God who pays attention to the small details of our lives.”¹⁹ The scripture, Luke 12:6-7 reveals the gentle healing touch of Jesus:

“Are not five sparrows sold for two pennies? Yet not one of them is forgotten in God’s sight. But even the hairs of your head are all counted. Do not be afraid; you are of more value than many sparrows.”²⁰

Kornfeld’s writings which created a guide to care and counseling in faith communities continues to plant seeds of healing in teaching clergy and lay persons the care of others: “Many of Jesus’ teachings helped people live in the present:” I have come that you might live in its fullness.” His teachings changed behavior through affecting his

¹⁶ Kornfeld, *Cultivating Wholeness*, 243.

¹⁷ Ibid.

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ Ibid.

followers' sense of helplessness [hopelessness], which underlies the avoidance of living [the "paralysis" of spirit, mind, and body]. Jesus knew that anxiety prevented living life abundantly."²¹

The transformation in the life of the writer reveals that Jesus knew that "paralysis" of spirit, mind, and body prevented living life abundantly or living at all. The suffering in the life of the writer affected the ability to live life abundantly.

The ultimate goal of the writer for their ministry model is quite simple. The writer's desire for persons who are suffering from a "paralysis" of spirit, mind, and body because of a life-altering crisis is to hear the words and power of God in their hearts and experience the healing words and touch of Jesus Christ. Even though words of compassion and healing are difficult to hear during "paralysis," this does not negate the promises of God. One of the ways to hear those words is through the hearing and listening of the essence of healing in Biblical stories.

An in-depth look at the intimacy of the passion in Jesus' words is revealed in the writings of Fran Ferder, *Words Made Flesh*: "Words can 'soothe more than oil' (Ps 55:21 or be as fierce as 'fire' in your mouth (Jer 5:14). Words can be 'truthful' (Eccl 12:10). 'They wound' (Prv 18:8) and they 'heal' (Ps 107:20)."²²

In the Christian scriptures, word has been made flesh in the person of Jesus connecting to humanity. Words cannot be disconnected from the heart.

²¹ Ibid.

²² Ferder, *Words Made Flesh*, 115.

The most explicit words experienced by the writer during a time of “paralysis” of spirit, mind, and body, caused by the trauma of the writer’s son becoming a quadriplegic were spoken by Jesus in the story of the healing of a paralytic narrated in Mark 2:1-13:

Then some people came, bringing to him a paralyzed man, carried by four of them and when they could not bring him to Jesus because of the crowd, they removed the roof above him; and after having dug through it, they let down the mat on which the paralytic lay. When Jesus saw their faith, he said to the paralytic, “Son, your sins are forgiven.” Now some of the scribes were sitting there, questioning in their hearts, “Why does this fellow speak in this way? It is blasphemy! Who can forgive sins but God alone?” At once Jesus perceived in his spirit that they were discussing these questions among themselves; and he said to him, “Why do you raise such questions in your hearts? Which is easier, to say to the paralytic, “Your sins are forgiven,” or to say, “Stand up and take your mat and walk”? But so that you may know that the Son of Man has authority on earth to forgive sins”-he said to the paralytic- “I say to you, stand up, take your mat and go to your home.” And he stood up, an immediately took the mat and went out before all of them; so that they were all amazed and glorified God, saying “We have never seen anything like this!²³

The words of Mark’s story of healing the paralytic recounts Jesus’ action of healing and forgiveness in response to paralysis: “The narrative invites listeners to celebrate both the determined faith of the paralytic and his friends [faith community group] and the joy of his newfound strength to walk. The sign of such confidence is an all-out exploration of the possibility of getting up and walking away from whatever cripples us.”²⁴

The ability to get up and walk away from whatever cripples us cannot be done alone. The extended hand of another, church community group, and clergy, supports the healing process as it unfolds through the words and healing power of Jesus Christ. The opportunity for a bodily-paralyzed person to get up and walk is through the miraculous

²³ Boomershine, *Story Journey*, 53.

²⁴ Ibid.

works of Jesus Christ. The opportunity for a person experiencing the “paralysis” of spirit, mind, and body through a life-altering crisis, to be renewed again also is through the miraculous works of Jesus Christ.

The writer’s spiritual transforming opportunity evolved through the healing touch of Jesus Christ, as her body lay helpless in the hospital from a near-death experience; possibly dying from a double pulmonary embolism. The awareness that surfaced for the writer was her son; a quadriplegic had walked spiritually away from what had crippled him. The writer’s son was blessed to receive extensive healing to his body. Although he sits in a wheelchair, he is not prevented from continuing to live life vibrantly. The experience of God’s healing powers is shared through a Spinal Cord Support group organized by the writer’s son. The continuation of his shared story to others who are paralyzed physically and or experiencing a “paralysis” of spirit, mind, and body extends the opportunity to receive healing on a spiritual faith journey causing change new perceptions, and ultimately transformation.

The realness of this message lies in the center of the ministry model. The writer’s focus is for people to experience healing, change, and transformation through the ministry model created for sacred space.

Theological Analysis

The longing of the writer’s soul to tell someone her story became overwhelming, exhaustive and heavy burdened. In Psalm 55: 22 the Psalmist offers a chance to people for God to sustain them in carrying heavy burdens upon their hearts. The Psalmist says:

Cast your burden on the Lord, and [God] will sustain you; and He [God] will never permit the righteous to be moved.²⁵

The writer's experience in carrying the burdens of trauma and loss in life-altering crises was not accepting of the Psalmist words of compassion. The Psalmist's words of God sustaining one in the midst of trauma were difficult to hear. The writer's Christian experience with the church and the intimate feeling of love of God was evidence of God caring for God's people, for the writer, in a time of need.

The writer's theological training had interwoven an in-depth understanding of how the burdens of life, the love of God, and Jesus as Healer work together in people's lives. The threads of the woven piece for understanding began to (what the writer perceived) strangle the writer, as the intensity of trauma in a "paralyzed" state became a heavier burden.

In actuality, the interwoven threads of understanding were the epitome of God's love, carrying the writer, not strangling her. The Psalmist in Psalm 124:1 provides words of encouragement to the courage it takes to realize that there is hope in the midst of disbelief. The psalmist says:

If it had not been for the Lord who was on our side, Let Israel now say: If it had not been for the Lord who was on our side,"²⁶

It is evident that without God there is no ultimate hope for rescue from the devastating effects of disaster. God in God's goodness makes a way out of what is perceived to be inescapable for his own people.

The passion of the writer in creating the ministry model is to help people know someone understands their word of desire to want to flee from the burdens life has

²⁵ Psalm, 55:22. NRSV

²⁶ Psalm 124:1-2. NRSV

brought, rather than face and overcome it. The desire to seek shelter and want peace is in the heart of a dove. Therefore, the hearts of people suffering in crisis is the desire to want peace and seek shelter. God hears the prayers of people experiencing a broken spirit and a contrite heart seeking shelter.

The reward to healing and finding peace in the shelter of God is phenomenal. Yes! Even here on earth.

The writer found peace in the shelter of God after her soul's longing was exhausted. The writer's near-death experience became a surge of spiritual power drawing her out of the wilderness. God had never left the writer in her time of despair. The writer found a deeper reality to the presence of God in the midst of suffering, despair, and "paralysis." The writers' spiritual transforming faith journey became a reality in the shelter of God. The writer experienced an intoxicating exuberant renewed energy which was electrifying becoming illuminating to the writer's soul. The writer's experience was like that of a new baby being born. The womb of a mother cannot be seen opening, but, a baby appears at the time of birth as it is delivered from the mother. For the writer, the experience was at the time of deliverance from the "paralysis" of spirit, mind and body. The writer's total being opened and an overwhelming abundance of renewed energy was delivered. The energetic feeling was charged with electricity that caused excitement. The Omnipresent and Omnipotent God was present. During the writer's near-death experience, her soul and total being had surrendered to God for God's saving grace and mercy. The writer was submerged in the healing of Jesus Christ, just as others in the healing stories of Jesus.

Paul Tillich describes pastoral care as a “helping encounter in the dimension of ultimate concern.”²⁷ Howard Clinebell offers support to Tillich’s words “If ministers have integrated their theological education with their clinical education in counseling, they are prepared to be uniquely helpful in this much-needed ministry of meanings.”²⁸ Dietrich Bonhoeffer’s familiar statement, “God is the ‘beyond’ in the midst of our life,” can be used to describe the unique focus of pastoral care and counseling.²⁹ Wayne Oates aptly calls this awareness “the God-in-Relation-to-Persons Consciousness.”³⁰ This consciousness as identified by Clinebell, “should help pastors recognize the spiritual dimension present in every counseling [pastoral care] situation. This transpersonal awareness is central in all counseling [care] that is truly pastoral.”

Fran Ferder writes in her book, *Words Made Flesh*,

For Luke, it was important that Jesus be understood as one whom, from the beginning, was eager to hear the word of God. It appears that a deeply rooted attentiveness to that work, as it came to him through his own life experience, was characteristic of Jesus from the start of his public ministry. His ordeal in the wilderness can be seen as an intense listening experience, as an effort to come to a greater awareness of his life mission. The entire synoptic writers place Jesus in the wilderness engaged in a lonely struggle against the attractions that pull at most people at one time or another. In Matthew and Luke, Jesus sees stones, the cold, hard places of life—and wants bread. He wants to be comfortable and full.³¹

The writer’s experience of being in the wilderness was after the completion of seminary to begin a public ministry in the faith community. During this time was the onset

²⁷ Address at the National Conference of Clinical Pastoral Education Atlantic City, New Jersey, (November 1956), quoted in Clinebell, *Basic Types of Pastoral Care and Counseling*, 67.

²⁸ Clinebell, *Basic Types of Pastoral Care and Counseling*, 67.

²⁹ Ibid.

³⁰ Ibid.

³¹ Ferder, *Words Made Flesh*, 31.

of the writer's son becoming a quadriplegic. The writer's experience of trying to find reason why this would happen in the life of her son, as well as her own, after graduating seminary, was impossible without God. The writer struggled with trying to hear God's words. The writer, too, wanted bread, a substance to fulfill the soul from the loneliness in the wilderness. The writer was reminded of the loss of her unborn son. The lonely feelings were present once again in trying to understand the loss. During the transforming moments of the writer, great compassion was regenerated and renewed for the mother of Jesus. The mother who watched her son crucified on the cross.

Ferder exemplifies how Jesus' life is theologically intertwined into the hearts and desires of those seeking God's presence for healing and change.

Ferder continues to speak more to the desires of Jesus, listening for God, for new perceptions. She writes:

It is in the wilderness, in the empty, lovely, unsure places of life, that Jesus hears God's voice: "Man does not live on bread alone but on every word that comes from the mouth of God." (Mt 4:4)

A word. Every word. It would be a word one could live by and stake their very life on. Jesus would listen to it in the hills at dawn and in the oppressed crowds in the daytime. He would tell his followers to do the same. Jesus learned something essential about human communication and its closeness to prayer in the wilderness. He learned that both start with listening. Jesus stressed the relationship between listening and understanding, and spoke of his own sadness when He noticed an absence of listening in those around him. Jesus expressed his concerns with the words of the prophet Isaiah:

You will listen and listen again, but not understand . . . For the heart of this nation has grown coarse, their ears are dull of hearing . . . for fear they should . . . hear with their ears, understand with their heart, and be converted and be healed by me." (Mt 13:15)

The heart of Jesus seeking the word of God to bring about change is the vision of people's hearts who are suffering in a "paralysis" of spirit, mind and body. It is evident in Jesus' life that listening whether in the wilderness or public ministry is the key to hearing God. God is present and waiting to listen to the stories to bring about change and transformation.

The opportunity for the writer to listen to the stories of individuals in the ministry model implementation was also the opportunity for the writer to listen to God speaking to her heart. The writer's experience was leaving the wilderness, or perhaps still within the wilderness, but she was not alone anymore. The voice of God was with her. The writer could hear a word from God—I am with you and you are being changed. The writer's awareness was one of being "unstuck" or "unparalyzed." The writer understood God had never abandoned her. The "paralysis" in the wilderness was so intense upon the writer's spirit, mind, and body it had become difficult to hear the God the writer always knew loved her and would carry her. God is always present and waiting for humans to hear a word from God.

The *Journal of Religion and Health* provides the Christian view of the body-mind-spirit intervention:

In the New Testament, the healing ministry of Jesus has a prominent place. First, healing took place through Jesus, and individual with the perceived authority and power to heal. Second, the healings came in response to the requests of the sick person, relatives or friends [the faith community]. Third, Jesus rarely healed in solitude; generally, there were crowds present [church community]. Depending on the circumstance and what the individual person required, Jesus healed by word, simple touch, prayer, or forgiveness of sins. Each person was unique. Jesus was a product of His Jewish heritage. The God of Israel was the ultimate Physician. "A religious account of illness offers a shared experience through which a community can understand meaning of suffering, sickness, limitations, and death" (Englehardt 1986, 35). Jesus'

belief was in a good and loving God. He had compassion and a great desire to relieve human suffering wherever He found it, since He understood such suffering to be contrary to the will of His Father [God].³³

The focus of the writer's ministry model is to help persons to know and understand that God's will is not that they suffer. In this world where people are fighting with each other, losing loved ones, and are faced with causes of a "paralysis" a hand needs to be extended. The hand of God and Jesus the Healer is extended.

In summary, the *Journal of Religion and Health* explains the meaning of body, mind, and spirit in the order of the Divine:

"Body" refers to the physical, biological, and chemical aspects of a human person. "Mind" refers to the mental processes and to emotions. "Spirit" refers to one's relationship with the Divine and one's relationship with other people because of one's relationship with the Divine. "Spirit," then, need have no specific denominational overtones. In addition, even if one is atheist, one still has a relationship with the divine (that of denial), so that one can still speak of how the denial of a relationship may affect one's relationship with other persons [the denial is a part of the "paralysis" which occurred in a life altering crises].³⁴

The ministry model identifies that the connection between the mind, the spirit, and body is present throughout a life time through different crises. The connection of spirit and mind embraces the body as human beings are best regained not in parts but in their wholeness and well-being.

Chapter Four will discuss the methodology used by other writers to demonstrate the integration of the spirit, mind, and body interconnectedness promoting healing and transformation.

³³ Patricia A. Fosarelli, "Fearfully Wonderfully Made: The Interconnectedness of Body-Mind-Spirit," *Journal of Religion and Health: Psychology, Spirituality Medicine*. Volume 41, Number 3, (Fall 2002), 222-223.

³⁴ Ibid., 208.

CHAPTER FOUR

METHODOLOGY

This chapter will identify the methodology and the design of the model to be used in the field experience.

The design of this model takes into account the importance of a great need in the church to meet the demands of the family, community, and world grieving from loss and trauma. The church is called to address the many concerns of individuals who are grieving. Whether persons face the death of a loved one, a change in job status, a divorce, a war trauma, hopelessness, or other losses, we all must work together through the grief that is a natural reaction to life-altering crises causing “paralysis” of spirit, mind and body. The model can also be used in agencies and institutions where people are seeking wholeness and well-being.

The design of the proposed model is based upon a Solution-Focused Method by Insoo Kim Berg and Steve de Shazer and their colleagues, founders of the Brief Family Therapy Center in Milwaukee, Wisconsin. The methodology is to measure change and transformation in the care of individuals.

There are five phases of transformational steps used in the Solution-Focused Method. These five steps will be used to support the writers’ project.

Step 1. Working with the individual:

How to perform a cooperative working relationship

Step 2. How to begin with the end in mind:

Negotiating well-formed goals

Step 3. Orienting the individual toward Solutions

How to communicate for change

Step 4. Solution-Focused Intervention:

How to construct interventions that invite and facilitate change

Step 5. Goal continuation:

How to help the individual continue noticing change.

Berg and de Shazer convey that persons who have experienced life-altering crises and are trying to seek renewed healing energy have already begun to “move toward wholeness.”¹ The key is for the pastor of the faith community to help the person(s) to see the changes they already have been making (of which they were unaware) and help them use their strength, creativity, and imagination to support these changes² through renewed energy. The principles of this method “assert God is in the midst of our changing lives; God is the healer and individuals try to move toward wholeness.”³

In January 2003, the implementation of the project began with choosing ten persons from the congregation of the writer’s context, Cross Creek Community Church. A meeting was held with the Pastor to discuss and choose ten persons who were experiencing “paralyzing” effects of traumatic life-altering crises within the past year. The persons were selected based on their emotional and psychological stability from the results of the trauma with the understanding that the retelling of the story could be emotional.

¹ Kornfeld, *Cultivating Wholeness*, 114

² Ibid.

³ Ibid.

The writer followed up with a personal and confidential informational telephone interview to pique the interest of each, in hopes of obtaining 7-8 individuals who would be willing to participate in the project. A questionnaire consisting of twenty-one questions was used to assist in determining the participants' eligibility and stability (see Appendix A). The ages of the participants ranged from 25 to 65 years. The purpose of the twenty-one questions would be to determine if change from a life-altering crisis has caused one to become dependent on others for care, support and survival. The group is multi-cultural consisting of African-American and Euro-American men and women. There were seven individuals who agreed to be participants in the project. The proposed time for the project was a period of four weeks. During this time observation and data gathering took place for review of the impact of the project. The data gathering process consisted of pre and post-test, story telling, listening, journaling, and prayer, using a "Spiritual Involvement and Belief Scale."⁴

Do not be conformed to this world, but be transformed by the renewing of your minds, so that you may discern what is the will of God. What is good and acceptable and perfect.⁵

Step 1: Working with the individual

On January 22, 2003, the first session was held with the group of seven. The first step of working with the individuals and forming a cooperative working relationship evolved into moments of individualized perceptions of what would take place. Berg and de Shazer identify the solution-focused method as one that "requires a change in

⁴ Robert L. Hatch, M.A. Burg, D.S. Naberhaus, and Z.K. Hellmich "The spiritual involvement and beliefs scale: Development and testing of a new instrument," *Journal of Family Practice*, 46, (1998): 485-486.

⁵ Romans 12:2 NRSV

perception with a paradigm shift from problem solving to solution building.”⁶ The individual perceptions were unknown because they were sheltered in the spirit, mind, and body of each individual. Each person came seeking a way to feel better about themselves and their lives, evoking renewed hope out of hopelessness.

The group was provided an environment within the context, which was focused in a private closed-door room. The environment provided sacred space where the individual could feel safe and experience the presence of a healing God. The setting of the room was comfortable and colorful. The setting provided an atmosphere (which was verbally stated) of confidentiality. Berg and de Shazer identify solution-focused methodology as one, which “is more akin to coaching and conversation than to traditional psychotherapy. Through talking together, the individual is helped to see what he/she is doing that is good for them and then is coached by [clergy] to help it to continue to happen.”⁷

The writer created a ritual for the participants as they entered the door of the room each time the group met. A large lead crystal bowl was filled with warm water and olive oil, creating a warm soothing and cleansing effect to the hands when they were submerged. Upon arrival, the participants would wash their hands in the warm water and olive oil. Their words of reflection consisted of “I’m washing my problems away,” “I feel clean,” and “I’m emerging myself into the water.” The writer heard these responses from the participants as a way of connecting themselves to renewed hope and healing on their spiritual journey. The longing of the participants’ soul was being connected to a reviving spirit. This ritual could possibly remind one of his/her baptism. The ritual was also a form

⁶ Ibid., 114

⁷ Ibid., 120.

of cleansing, washing away the suffering. Maldona Patrice Somè identifies “ritual as an art, an art that weaves and dances with symbols, and helping to create that art rejuvenates participants. Everyone comes away from a ritual feeling deeply transformed.”⁸ The ritual created by the writer was one of invitation for “cleaning and reconciliation”⁹ in the face of the onslaught of life altering crises. The water ritual is one that affects people in a healing way. The healing of the effects of grief, trauma, and loss would hopefully have been renewed in the smallest way after the emerging of hands, evoking new opportunity for sharing in a trusting faith community.

The hope of the writer was to establish a cooperative working relationship in the group by placing the ritual of reconciliation as a beginning with the end in mind. The process began to form a spiritual cooperative working relationship. Spiritual hospitality had begun to work developing community among the group. The writer initiated an inviting spirit for individuals to desire to develop a spiritual relationship that will help them to move from the paralyzed feelings of hopelessness to feelings of hope and well-being.

Step 2: How to begin working with the end in mind and negotiating well-formed goals.

The focus of the second step in the first meeting was to direct the group toward finding significant meaning in their stories. This type of direction helps the individual to acknowledge areas they would like to move from and create new direction or goals with an end in mind.

⁸ Malidona Patrice Somè, *The Healing Wisdom of Africa: Finding Life Purpose Through Nature, Ritual, and Community* (New York: Penguin Putnam, 1998), 23.

⁹ Ibid., 218.

Each member of the group was asked to complete a Confidentiality Agreement Statement (Appendix B), a Code of Ethics Agreement (Appendix C), and an Information Release Agreement (Appendix D), and a pre-test Spiritual Involvement and Belief Scale (Appendix E), which provided evidence to focus on the beginning of the process with an end in mind. The pre-test informed the writer of the individual's spiritual involvement and belief. The agreements supported privacy to individuals sharing their personal stories. Each member of the group was welcome to move at his or her own pace without feeling pressured. The writer shared with the group that the goal was not to change anyone, but to help discover solutions and work to maintain them, acknowledging exceptions to being stuck in a mode of "paralysis" which evokes change. The writer's hope is the participants will realize what will be the smallest sign that a change has happened to move him or her from the impasse where no change is taking place.

The way in which movement should occur is through the individuals telling their stories, journaling, and creating awareness through the spiritual assessment tools. The goal of the writer was to listen as each person formed his or her goals through the interactive connection with the group.

The first goal of each individual was the one that already began to happen by each member agreeing to participate, expecting change and transformation. The second goal that occurred was the hope of each person to try to feel the essence of the beauty of God in his or her lives. The third goal was movement toward healing and wholeness through evidence of renewed energy experienced by the participant, evoking change. These goals had become matters of the spirit, mind, body, soul, and heart of each person. Each person

understood the goals were attainable with the hard work of facing their “paralysis” of grief. They understood the process of “hard work also instills hope.”¹⁰

Step 3: Orienting the person toward solutions: How to interview for change.

The focus of this step occurred during the second session. This step helps the individual to create an understanding which informs him or her that change can actually take place. The opportunity to create awareness in the mind of him or her that others are experiencing a “paralysis” helps them to know there is support and they are not alone.

The experience of the writer has been to learn how to listen, be attentive, and be very present for the person who is sharing a story of grief and life-altering crises. The interview for change began to take place in the initial telephone interviewing conversation with the individual for their participation in the project. The introduction and purpose for the project as presented by the writer to the participant was one of caution and enthusiasm. The participant needed to feel confident in sharing their information. The enthusiasm around the project was a display of the value of the participation from the writer. The response of the future participant was one of appreciation, a snippet of hope, and one of gratefulness that someone seemed to care about their well-being even if it was through the project. The observation of participants continued to take place into the group meetings as the writer expressed an interest as to what was happening with the individual. Through “active listening to his or her story”¹¹ the writer was able to inquire about change and renewed energy.

¹⁰ Kornfeld, *Cultivating Wholeness*, 126.

¹¹ Ibid., 127.

A powerful question used to get to “the heart of an individual’s hope for change” suffering from a “paralysis” state of grief is a miracle question:

Suppose tonight, you go to bed and fall asleep and, while you are sleeping, a miracle happens. The miracle is that the problem that brought you here today is solved! But, you do not know that the problem that brought you was solved, because you were asleep. When you wake up in the morning, what will be some of the first things you will notice that will tell you a miracle has happened and the problem that brought you here is solved?¹²

The response from this question is the revelation of Jesus Christ as He goes about touching and healing the lives of people. The irony is people do not know their lives have been touched until there is evidence of the miracle. Awareness began to take place with the individual as they shared stories and began journal writing. The stories proceeded into the third session.

Step 4: Solution-Focused Interventions: How to Construct Interventions That Invite and Facilitate Change

The focus of this step occurred during the fourth session. This step helps the individual to focus on the impact of the group interconnectedness on their life through sharing the sacred stories. The bond developed in the group becomes a vessel by which participants can begin to open themselves to interventions, which help to construct and invite change.

The effect of this step is very powerful. The methodology of this step becomes theological whether the participant realizes it or not through the story telling. The process illuminates light upon one’s personhood. Within a very short time of group meetings and

¹² Ibid., 128.

an intensity of story telling and tears, this step becomes an acknowledgement of the spiritual transformative journey.

The methodology includes a Want to Be Different, Change, and Success Scale (Appendix F) along with the journal writing. The use of this scale was to help individuals to understand that God never left them even in their “paralysis” of spirit, mind, and body. The intent was to evoke an awareness to even the smallest change and miracle, which may have taken place. The revealing factors of God walking with the participant, guiding, and directing are a showing of their participation in the group. The Spiritual Involvement and Belief Scale evokes thoughts concerning the spiritual connection in participants lives. The inside workings of the power of God, the healing expertise of Jesus Christ, and the guiding of the Holy Spirit is an eternal fascination of God’s love. The workings of the power of God in participants’ lives are revealed sometimes as miracles. Therefore, participants’ desire is for a healing and loving God to ease the pain of “paralysis.”

During the process, a trust had formed between the writer and the participants. The “paralyzing” state of individuals had begun to change. The stories began to become stories of hope in place of sadness and grief. The emotional work of getting to this point is an elevation of lifting up the burden to God, which caused despair.

One of the physical interventions used was each person received a wooden carved chest made in India with beautiful designs of silver plated diamond shapes attached with a circle of life in the center. The box held a beautiful stone with a cross placed on it. It also contained five wooden shaped hearts, each a different size depicting God’s love for them.

The wooden carved chest was a representation for a place to keep sacred and holy things, thoughts, remembrances, hopes, and dreams. A symbol of the circle of life was God in the presence of sacred space. The stone was a representation of substance—bread,

as Jesus so desired in the wilderness—a fulfillment of God’s love. The wooden shaped hearts reminded the participants of God’s love in their hearts.

The intervention that invited and facilitated change was the continued active, attentive, and careful listening of the writer which created a context in which participants felt “respected and understood”¹³ acknowledging that their voices are heard and their feelings are respected. The stories are ones of great pain, loss, and suffering. The stories of participants give voice to the cry of help to become whole again.

Berg and de Shazer’s method provided creative and sacred space for active interventions to take place in the group. The participation of the writer was one of listening prayerfully and empathetically. Berg and de Shazer describe the use of space created in the group in this way “When solution-focused therapists [clergy] take a “break,” from the group a pivotal action happens. Clients [persons] are told that what they have said in the session is important enough to merit the considered thought of the therapist [clergy]. And then they are left, and a [sacred] space is created. This is a dramatic event! The client [person] and the therapist [clergy] each “fill the space in ways unknown to the other.” In this space, “the mud can settle and the water can become clear.”¹⁴ The divine intervention of God can fill this empty space. Time is now given for the leader of the group to reflect on continued solution-focused interventions to present to the group as they begin to experience renewed energy and change in the clearing of the muddy waters and renewed energy freeing them from “paralysis” of spirit, mind, and body. The creation of space in the group is implemented at a time when person’s inward desires are to flee

¹³ Ibid., 130.

¹⁴ Ibid.

from the pain. The space created while the leader has left the room evokes a moment for participants to flee into God's open arms embracing their suffering and "paralysis."

The methodology used in the project depends on pastors and leaders being able to see and hear the unique solutions created by others. The need is to "pay careful attention to the exact words of their congregants as they listen to stories and watch for solutions which congregants have often overlooked."¹⁵ The vision is one in which the "pastor delights in their congregants and in their creativity"¹⁶ as the psalmist described in Psalm 1:

Blessed are the man and the woman
 who have grown beyond their greed
 and who have put an end to their hatred
 and no longer nourish illusions.
 But they delight in the way things are
 And keep their hearts open, day and night.
 They are like trees planted near flowering rivers
 which bear fruit when they are ready.
 Their leaves will not fall or wither.
 Everything they do will succeed.¹⁷

Step 5: Goal Continuation: How to Help the Individuals Continue Noticing Change

This step was used in the end of the project. This step guides the individual to new horizons. The renewed energy and awakened hope should not be a temporary fix. The

¹⁵ Ibid., 131.

¹⁶ Ibid.

¹⁷ Ibid.

inner works of persons' spirit, mind, heart, body, and soul would rekindle a burning a fire which connects with the Holy Spirit of God. The connection motivated the person to not return to a state of "paralysis." The strength, hopefully, gained through support, love, care, concerns, and God's grace and mercy would inspire the person to continue to move forward in wholeness and well-being. The continued noticing of little snippets of miracles would be evidence of change. The growth and change experienced had an impact upon the person that renewed their spiritual energy creating an awareness that makes them want to shout I'm healed. I see things differently. I'm free. I'm transformed by the renewing of my mind, spirit and body.

The value of the writer's ministry model is that participants are a part of the writer's context. Therefore, the continued noticing of change does not stop at the end of the group sessions. The opportunity evolves to continue to watch the participant grow and change through his or her spiritual transformative journey while interacting in the church community. A bond has taken place between individuals and there is continued encouragement.

In this step, the writer presented a Post Spiritual Involvement and Belief Questionnaire (Appendix G), which called the person to see how movement from a state of "paralysis" has taken place to a noticeable and encouraging change and beginning transformation. The perception of their outlook through a state of "paralysis" has become different. The writer provides moments of comfort and hope to the individual as shared in the book of Haggai 2:3-5:

How does it look to you now? Is it not in your sigh as nothing?
Yet now take courage, O Zerubbabel, says the Lord; take courage,
O Joshua, son of Jehozadak, the high priest; take courage, all you
people of the land, says the Lord; work for I am with you, says the

Lord of hosts, according to the promise that I made you when you came out of Egypt. My spirit abides among you; do not fear¹⁸

The question presented to the individuals was how do things look to you now after sharing in a faith community group, the “paralysis” stories that brought you here and the change of perception you are experiencing? This question presented was to help the person to realize that the presence of God’s Spirit around them and the work of God would proceed as long as the person opened their heart to feel God’s love. This was the surest guarantee for continued change.

The methodology used in this step promotes continued healing from “paralysis” in a grief state to renewed healing and energy. The individual begins to look at life differently. The smiles that come across one’s face in place of tears are joyful. The increased prayers begin to generate feelings of God’s grace and mercy in the grief stricken moments of pain.

Berg and de Shazer present a method which addresses individuals “noticing their own behavioral changes and to recognize the differences these changes make acknowledging the possibilities of setbacks and difficulties.”¹⁹

The writer’s model includes a ritual that helps the person to address in a deeper spiritual way an awareness of the possibilities of intense setbacks and difficulties. The ritual is one that helps the person to continue healing from a state of “paralysis” of spirit, mind, and body to a spiritual transforming journey. The ritual lifts up to God the traumatic effects one experiences from the impact of life-altering crises. The loss of a spouse, parent, friend, pet, cancer, diabetes, heart attack, stroke, AIDS, personhood, quadriplegia, loss of

¹⁸ Haggai 2:3-5, NRSV

¹⁹ Kornfeld, *Cultivating Wholeness*, 135.

a child, a baby, mental health issues, loss of job, loss of hope, and so many more are life-altering crises which create “paralysis.” The ritual, called “Saying Goodbye,” is described by Joyce Rupp as “the ache of autumn within us.”²⁰ Rupp addresses the ache of autumn as life and death. The blessedness within the ache is persons begin to become un-paralyzed and desire continued change. When we grieve in a healthy way over the goodbyes and suffering, we begin to open ourselves to new beginnings.

Rupp expresses the ritual of saying goodbye to suffering and emptiness as presented to the group in these words promoting continued change:

If you have ever said a deeply significant goodbye, you know “how the flowers felt,” you know what it is like to have life pelt you with sorrow, to be overwhelmed with emptiness, loneliness, confusion and sadness. At these times we are bent over, crushed, like the flowers that “lay lodged-though not dead.” The pain is overwhelming, often too deep for tears. The sorrow of it can pervade one’s whole self and hurt in every part of one’s being. No medicine, no bandage, no diversion, no luxury, no words can assuage the hurt and give it the freedom to desist and cease its painful bending, almost breaking of the heart.²¹

The words of Rupp continue to be heard as participants focus on saying goodbye to “paralysis” of spirit, mind, and body, welcoming in change and renewed energy:

We all need to learn how to say goodbye, to acknowledge the pain that is there for us so that we can eventually move on to another hello. When we learn how to say goodbye we truly learn how to say to ourselves and to others: “Go, God be with you. I entrust you to God. The God of our strength, courage, comfort, hope, love, is with you. The God who promises to wipe away all tears will hold you close and will fill your emptiness. Let go and be free to move on. Do not keep yourself from another step in your [transforming] journey. May the blessing of the God of autumn be with you.”²²

²⁰ Joyce Rupp, *Praying Our Goodbyes* (IN: Ave Maria Press, 2002), 43.

²¹ Ibid., 31-32.

²² Ibid., 30.

The words of Rupp resonated throughout the healing moments of the telling of stories. Most participants experienced a loss of an individual creating a “paralysis” state of being. The words of Rupp are used to say goodbye to what may cause a “paralysis” welcoming in new hellos to change.

Research Methodologies

The traumatic death of a loved one often times causes the onset of a “paralysis” state of being. The entrusting of the individual to God is a way of helping to move from the “paralysis.” The release of suffering opens the heart, mind, and spirit to remember the good things of the relationship generating increased healing. This section will discuss the research methodologies used to support the solution-focused method for the ministry model.

The Spiritual Practice of Transformation Methodology

The writings of Frederic and Mary Ann Brussat present a method of the spiritual practice of transformation. Frederic is a United Church of Christ clergyman. The Brussat’s identify, in their book *Spiritual Rx*, that with its practical emphasis upon personal societal transformation, its multi-faith perspective, and its encyclopedia array of more than 500 resources, “it is an invaluable guide to the riches of the path of practice. No matter what you’re emotional temperament [paralysis], your mental disposition, or your spiritual or religious tradition, you will find just the right prescription here for living a more meaningful and whole hearted life.”²³

²³ Frederic Brussat and Mary Ann Brussat, *Spiritual Rx: Prescriptions for Living a Meaningful Life* (New York: Hyperion Press, 2000), i.

The basic practice of this methodology is a tool for measurement. It “holds within its wide embrace the personal renewals that come with a spiritual awakening, a conversion, a mystical epiphany or enlightenment.”²⁴ The practice of this methodology helps individuals to develop and move into a deeper relationship with God and themselves. The practice is inclusive of group worship, private prayer, motivational change, community building, and emotional transformation through the path of a spiritual journey. The practice encompasses expressions of renewed joy, increased movement of spirit, mind, and body evoking increased physical exercise, and conscious attention to mood and new perceptions.

The continued integration of this methodology with the individual is that “transformation usually involves the shedding of old ways, especially those that have become burdens. This methodological practice proclaims that no matter whom you are, no matter what has already happened to you, no matter what you have done, it is still possible to be and do something new. Transformation implies a marked change in your life, but you can practice it by making single changes.”²⁵

Supportive Counseling Methodology

Donald Capps’s methodology, the method of supportive counseling, focuses on an important area of the methodological process of “encouraging appropriate action.”²⁶ The supportive counseling method encompasses the process of guiding individuals through

²⁴ Ibid., 246.

²⁵ Ibid., 247.

²⁶ Donald Capps, *Reframing: A New Method in Pastoral Care* (Minneapolis, MN: Fortress Press, 1990) 116.

troubled times, motivation, nurturing, growth, and encouraging appropriate action. The supportive counseling helps the individual to focus on personal insights and change moving them toward personality transformation and renewed strength in coping with their life situations. The integral part of this practice is an integration of the writings of Howard Clinebell, *Basic Types of Pastoral Care and Counseling*. Clinebell writes “the pastor uses methods that stabilize, under-gird, nurture, motivate, or guide troubled [individuals].”²⁷ Therefore, it is an integration of the faith community’s work to hear the cry of God’s people. Capps describe the encouraging of appropriate action, he states:

When persons are stunned or paralyzed by feelings of anxiety, defeat, failure, damaged self-esteem or tragic loss it is often helpful for the pastor to prescribe some activity that will keep them functioning and in touch with people. This diminishes the tendency to retreat into depression and to withdraw from relationships. Constructive activity gives temporary structure to the person’s chaotic world as well as providing ways of changing the painful situation.²⁸

The involvement and group support meetings helps to bring some constructive and creative structure to the individual’s chaotic world.

The writer will present the integration of other methodologies that support the project to change painful situations within the faith community in an attempt to show how movement toward wholeness takes place in the life of individuals.

Tibetan Methodology: The Basis of Transformation

In the Tibetan methodology, as presented by His Holiness the Dalai Lama, the basis of transformation has central themes of the lo-jong teachings. The lo-jong teachings

²⁷ Ibid., 112.

²⁸ Ibid., 116.

include, among others, “the enhancement of compassion, the cultivation of balanced attitudes towards self and others, the development of positive ways of thinking, and the transformation of adverse situations into conditions favorable to spiritual developments.”²⁹

The rewards of the lo-jong teachings are a transformation of the hearts and minds of individuals. Through sustained effort to cultivate and develop the positive aspects of the person, lo-jong teaches the way in which the mind is to become disciplined. The method is an integration of meditation, positive reinforcement of spiritual wisdom, and movement toward eliminating negative energy with renewed positive energy.

The teachings of lo-jong, which means “training the mind or transforming the mind implies a kind of inner discipline.”³⁰ The point of transforming the hearts and minds of persons is to find happiness and “overcome suffering.”³¹ The lo-jong teachings “concentrate directly on the development of the mind itself, through the transformation of attitudes and ways of thinking.”³² The Dalai Lama’s teachings of transforming the mind, integrated with lo-jong teachings, evoke the principle of a “mental discipline.”³³ The Dalai Lama writes, “the mental discipline required for the transformation of our hearts and minds cannot come about as a result of force. It has to be based on voluntary acceptance, which, in turn, will be based on a personal recognition that certain attitudes and certain ways of being are beneficial, whereas others are not. Only then on recognizing this, do we

²⁹ His Holiness the XIV Dalai Lama, *Transforming The Mind: Teachings on Generating Compassion* (London: Thorsons, 2000), VIII.

³⁰ Ibid., 1.

³¹ Ibid.

³² Ibid., 3.

³³ Ibid., 4.

voluntarily take it upon ourselves to follow a spiritual discipline. This way of engaging with a spiritual path is the only way that will transform our minds.”³⁴

The spiritual discipline is a goal continuation of how to help the person continue to notice change. The goal is for the individual to continue daily to stay focused on actions and renewed energy as change begins to take place with snippets of miracles, healing, and new perceptions. The connection to change brings about feelings of excitement, enthusiasm, increased self-esteem and hope. These feelings generate a spiritual connection to God that will hopefully cause the person to remain or become connected to the church community.

The Christian Methodology: The Healing Ministry of Jesus

The healing ministry of Jesus has a prominent place in the New Testament of the Bible. Christians look upon Jesus as the one who can heal the sufferings of people. Healing took place through Jesus, the one with the perceived power and authority to heal. Patricia Fosarelli described Jesus in the book, *Fearfully Wonderfully Made*, as one who “healed by word, simple touch, prayer, a forgiveness of sins.”³⁵ The interconnectedness of prayer, healing, and spirituality promotes renewed energy and transformation. The divine intervention of the power of Jesus Christ brings about change and transformation as long as the individual has an open mind and heart to receive it. The relationship developed between the individual and Jesus Christ affects the life of the individual in a transforming

³⁴ Ibid.

³⁵ Patricia Fosarelli, “Fearfully Wonderfully Made: The Interconnectedness of Body-Mind-Spirit,” *Journal of Religion and Health*, Volume 41, Number 3. (2002): 222.

way, which can achieve renewed energy and hope. The results are visible to the individual and others displayed through relationships, new insights, and renewed strength.

In I Corinthians 12:9, 28-30, Paul notes that the “gift of healing is for the benefit of the entire community.”³⁶ The person who is traumatized and experiencing a state of paralysis becomes less effective in family and community. The effect can play a debilitating role toward others. Human beings were created for community and the quest for healing deserves a communal aspect.

Fosarelli provides a Christian view of the body-mind-spirit interconnection and its relation to change:

If those who preach the Word of God or speak with others about God were to better understand the interconnection of body, mind, and spirit, how might that change the way they use, preach, or conduct Bible Study on biblical stories of healing? How might that change the way they speak about God to a troubled sister or brother? Might ministers join with physicians and nurses in their own congregation to jointly discuss health, disease and spirituality, both in the time of Christ and in our own? Because people with certain illnesses were removed from the community for its own good, healing them, was their restoration to fellowship with God and fellowship with their neighbors.³⁷

The focus of “How to Help the Client [individual] Continue Noticing Change,” as referred to in Step 5 of the ministry model, is to illustrate the importance of the individual remaining connected to the church community. The person can see the value of the differences in their lives these changes make and the importance of the need to continue the connection.

³⁶ Ibid., 224.

³⁷ Ibid., 222.

Why I chose the solution-focused method

The solution-focused method is grounded in the care of people who are experiencing the effects of “paralysis” of spirit, mind, and body during life-altering crises. The methodology is an intricate part of care and counseling in faith communities. The solution-focused method was chosen specifically by the writer through the guidance of the Holy Spirit and the illumination of God’s light upon the reading of the methodology.

The solution-focused method provides a plan for faith communities that focuses upon a pastoral care and counseling ministry. Insoo Kim Berg’s experience using this method in working with problem drinkers has helped them to move beyond setbacks and “paralysis” of the effects of life-altering crises.

The solution-focused methodology begins with an end in mind. The methodology helps to create a vision for individuals to move toward change.

In Edward Wimberly’s book, *African-American Pastoral Care*, “he gives a moving case study of the experience of a cocaine addict who used the resources of his church as he prepared to go to a rehabilitation program.”³⁹ In this case study, the individual requested prayer. Dr. Wimberly’s response was to organize a “prayer meeting”⁴⁰ with the family, pastor, and friends. Dr. Wimberly “was moved by this solution”⁴¹ which proved effective for the individual. A breakthrough in this individual’s healing came after

³⁹ Kornfeld, *Cultivating Wholeness*, 98.

⁴⁰ Ibid.

⁴¹ Ibid.

acknowledging, “that prayer was the only thing that could help him.”⁴² The solution-focused methodology focuses on the present and the future. Prayer became the intervention, the creation of sacred space, and the connection to God. Prayer brings reconciliation to the past, and change and transformation through the spiritual journey of “paralysis” of spirit, mind, and body.

The solution-focused method supports the project of the writer in the care of persons to heal and regenerate renewed energy, change, and transformation. This method presents an interweaving of all the intricate pieces as previously presented in the research methodologies. They are enmeshed together to help people who are suffering from a “paralysis” of spirit, mind, and body to reconnect to their inner selves as well as with others developing well-being, wholeness, and spiritual based relationships. The connection between the solution-focused method and the four research methods is that each one is focused on the individual’s healing from traumatic events. They are presented to show different ways and directions to embark upon pathways of spiritual journeys to renewed energy, change, and transformation of the “paralysis” of spirit, mind, and body. Each of these methods seeks to help persons to live and not die from broken-heartedness and anger inside of themselves, which can destroy the people’s soul, heart, body, mind, and spirit. Many people experience feelings of isolation and disconnection, but when there is someone who will reach out and offer alternative ways to healing which promote wholeness and well-being, a change does take place. The developing of renewed energy and hope creates new life, new insights, new energy, and new healing removing despair and hopelessness. God is in the midst of our changing lives even in the midst of suffering.

⁴² Ibid.

CHAPTER FIVE

FIELD EXPERIENCE

This chapter will introduce what happened during the actual implementation of the project inclusive of data collection method and data analysis objectives.

Trauma does not just happen to others. Many people would like to believe that it does. The threat of living in denial sometimes intensifies the “paralysis” when and if it occurs. Trauma does not choose any particular person for life-altering crises to occur. Trauma, crises, and life-altering changes occur in everyone’s life causing some dependence upon others for care and support. The challenge becomes overwhelming and sometimes unbearable. The broken-heartedness can become many times irreparable. The nauseating feeling left in the bottom of the stomach leaves one weak and feeble. The headaches are innumerable. The tears are like a waterfall that rushes with the force of gravity. Then one day transformation begins to take place when the hearts, spirits, and minds of persons are opened to change and vulnerability as they are brought to an understanding of how God is present in the midst of suffering.

The implementation of this project grew out of a vision the writer had dreamed would one day come to fruition in the context (a Bible believing and healing church, filled with the presence of God, Jesus Christ, and the Holy Spirit.) The writer’s hope was to create a support group where individuals could find a way to tell their stories of crises, and gain increased mobility without dependence upon others, causing healing, change of perceptions and transformation.

The implementation of this project was done with great sensitivity and care due to the nature of the stories of grief which would unfold.

When the writer began this project, she did not realize how difficult it would be to obtain persons to participate. It was quite evident every day during dialog with individuals that there was pain and loss in their lives. During the interview process, the writer began to feel emotionally connected to specific persons who were responding to the interview questions and expressing a desire to be a part of the project. The interview process was beneficial to the writer to understand these particular persons were experiencing “paralysis” of spirit, mind, and body, and seeking change and wholeness.

The writer made an effort to stay consciously aware of her feelings during the dialog with the participants. The feelings of compassion, care and concern were evident. After the interviews, the writer realized how much she had actually begun the spiritual transforming journey to gain a sense of well-being about her own personhood. The writer was able to reach out to aid others without having feelings of anger, resentment, rejection, and shame. The interview experience informed the writer of an unconscious need to embark upon a spiritual transformative journey along with the participants.

No one wants to re-visit an experience of traumatic life-altering crises. The pain can once again be as intense as it was when the event took place. The gentle handling of each person invited to partake in this group was done with prayer and spiritual finesse. The invitation by the writer to participate was done with spiritual zest and vitality to come into the Lord’s House and visit with God as a spiritual transforming journey occurs, providing healing to “paralysis” of spirit, mind, and body through life-altering crises. The look in each person’s eyes, face, and verbal responses informed the writer of needed and

ready participation. The involved participants had been accepted through the initial Interview Questionnaire (Appendix A).

The Beginning

The meetings began in the fireside study room of the context providing warmth and comfort. The chairs were formed in a semi-circle giving space to each participant. There was a gift placed in each chair, which consisted of a journal, pen, and a small wooden carved chest to hopefully touch the heart of each participant.

The participants were observed as they approached the door of the room and scanned its surroundings. Each was invited to immerse their hands in warm soothing water embellished with a touch of olive oil. The augmentation of the presence of oil was used as a symbol of divine blessings of peace and bountifulness, as uplifted in the book of Genesis, concerning Noah and the swelling waters upon the earth. It reads:

He [Noah] waited another seven days, and again he sent out the dove from the ark; and the dove came back to him in the evening, and there in its beak, was a freshly plucked olive leaf; so Noah knew that the water had subsided from the earth.¹

The verbal responses were expressed as feelings of peace, cleanliness from the day's trials, feelings of hospitality and welcome, and feelings of washing away the pain. The hope was the swelling waters in the participant's life would begin to subside as each embarked upon their spiritual faith journey.

The participants began to gravitate toward seating and elements that would guide them on a spiritual transformative journey. Once the group had gathered, they were invited to engage in prayer inviting God and the presence of the Holy Spirit into the

¹ Genesis 8:10-11. NRSV

journey. The group was diverse and multicultural. The group consisted of four women and three men. Two of the participants were African American and the five were Euro-American. The ages ranged from 25 to 65 years.

The question, which surfaced for the writer during the implementation process, was: what are the signs and signals indicating the effects of trauma and life-altering crises?

In her book, *Cultivating Wholeness*, Margaret Kornfeld reflects upon the yearning for spiritual security spoken of in the Chinook Psalter: “We are rooted in the ridge of changes in the time of changes”²; we are looking for God in the midst of change itself. She further notes, “others of us are yearning for change that transforms, we are stuck (paralyzed) in ourselves: we wish to be moved, to feel alive, to be whole: we are seeking personal transformation and nurture for our souls.”³

Therefore, the evidence of the effects of being stuck or experiencing “paralysis” is feelings of rejection, isolation, loneliness, silence, grief, hurt, anger, pain, lack of clear understanding and signs of dependence upon others. The effects of trauma cannot be dealt with, until the individual experiencing it acknowledges how they came to this place in their lives, as painful as it may be.

During the implementation of this project, the writer was recovering from a near-death experience. This experience helped the writer to be transparent during the group meetings. The writer’s near-death experience had taken her on an unexpected faith journey that embraced the presence of God in a way that was never before experienced. The writer found herself in a space with God that was not planned at the initial planning of the

² Kornfeld, *Cultivating Wholeness*, 3.

³ Ibid.

project. It is apparent God had taken the writer to a place which would prepare her in unknown ways for the journey of the contextual model.

Objective of the Project

The objective of the project for the group was presented to the participants before any work began to take place. The objective was for individuals to experience a transformative faith journey moving from “paralysis” of spirit, mind, and body to renewal and spiritual transformation. The effects of trauma and life-altering crises can cause individuals to have difficulty in moving forward in life toward wholeness and well-being.

The participants were informed that the transformative journey would take place through a pre-test, using a Spiritual Involvement and Belief Scale (Appendix E) and a post-test using a Spiritual Involvement and Belief Scale Questionnaire (Appendix G) questionnaire, journal writing, story telling, and a willing spirit. The solution-focused method, with an end in mind at the beginning of the journey was explained to the participants. The participants were told the methodology presented would be a guide toward spiritual transformation. They were informed the meetings would occur once a week for four weeks within the context. The time would consist of two hours, providing time before the group ended for winding down and some closure for feelings which may have surfaced. The group was asked to sign a Confidentiality Agreement (Appendix B), Information Release Agreement (Appendix D), and a Code of Ethics Agreement (Appendix C). The experience of the writer as a chaplain had evoked the need for the use of these forms to support the privacy of individuals’ lives after group meetings.

Spiritual Involvement and Belief Scale and Questionnaire (SIBS)

The first meeting began with the group completing the pre-Spiritual Involvement and Belief Scale questionnaire.

Spiritual Involvement and Beliefs Scale

How strongly do you agree with the following statements? Please circle your response.

Strongly Agree (7), Agree (6), Mildly Agree (5), Neutral (4), Mildly Disagree (3), Disagree (2), Strongly Disagree (1)

1. I set aside time for meditation and /or self reflection	7 6 5 4 3 2 1
2. I can find meaning in times of hardship	7 6 5 4 3 2 1
3. A person can be fulfilled without pursuing an active spiritual life	7 6 5 4 3 2 1
4. I find serenity by accepting things as they are done	7 6 5 4 3 2 1
5. I have a relationship with someone I can turn to for spiritual guidance	7 6 5 4 3 2 1
6. Prayers do not really change what happens.	7 6 5 4 3 2 1
7. In times of despair, I can find little reason to hope	7 6 5 4 3 2 1
8. I have a personal relationship with a power greater than myself.	7 6 5 4 3 2 1
9. I have had a spiritual experience that greatly changed my life.	7 6 5 4 3 2 1
10. I have had a spiritual experience that changed my life in a renewing and transforming way.	7 6 5 4 3 2 1
11. I have had a spiritual experience that changed my life in a negative way.	7 6 5 4 3 2 1
12. When I help others I expect nothing in return.	7 6 5 4 3 2 1
13. I don't take time to appreciate nature.	7 6 5 4 3 2 1
14. I don't take time to appreciate myself.	7 6 5 4 3 2 1
15. I do take time to appreciate myself.	7 6 5 4 3 2 1
16. I have joy in my life because of my spirituality.	7 6 5 4 3 2 1
17. I have joy in my life.	7 6 5 4 3 2 1
18. My relationship with a higher power helps me love myself.	7 6 5 4 3 2 1
19. My relationship with a higher power helps me love others more completely.	7 6 5 4 3 2 1
20. Spiritual writings help enrich my life	7 6 5 4 3 2 1
21. I have experienced healing after prayer.	7 6 5 4 3 2 1
22. I have experienced peaceful feelings after prayer .	7 6 5 4 3 2 1
23. My spiritual understanding continues to grow.	7 6 5 4 3 2 1

24. I focus on what needs to be changed in me, not what needs to be changed in others.	7 6 5 4 3 2 1
25. In difficult times, I am still grateful.	7 6 5 4 3 2 1
26. I have been through a time of suffering that led to spiritual growth.	7 6 5 4 3 2 1
27. I solve my problems without using spiritual resources.	7 6 5 4 3 2 1
28. I examine my actions to see if they reflect my values.	7 6 5 4 3 2 1
29. How spiritual a person do you consider yourself? (With "7" Being The Most Spiritual.)	7 6 5 4 3 2 1

The writer observed the group completing this step of the journey, while contemplating the next step of movement for the group. The thoughts were ones that considered the impact of stories that were about to be told. The writer recalled the story of the healing of the paralytic in Mark 2:1-3. Thomas E. Boomershine reveals in his writing of the book, *Story Journey*, how "Mark's story of the healing of the paralytic recounts Jesus' action of healing and forgiveness in response to paralysis."⁴ Boomershine further discusses the invitation of the narrative to the listener. "The narrative invites listeners to celebrate both the determined faith of the paralytic and his friends and the joy of his newfound strength and walk. It also welcomes listeners' skepticism about Jesus' authority to act as God who forgives and makes new."⁵ The group was invited to take sacred moments to forgive themselves. The implicit appeal which Boomershine further notes "is to have confidence in Jesus as the agent of God's grace and power. The sign of such confidence is an all-out exploration of the possibility of getting up and walking away from whatever cripples."⁶ The group was encouraged to walk away spiritually from the crippling and paralyzing effects of trauma, loss, grief, pain, and suffering. The completion

⁴ Boomershine, *Story Journey*, 53.

⁵ Ibid.

⁶ Ibid.

of the pre spiritual test would hopefully inspire the participants to think about the aspects of their lives that are experiencing a “paralysis.”

**Components of the Spiritual Involvement and Belief Scale
Questionnaire (Appendix E)**

1. Ability to find meaning
2. Acceptance
3. Application of beliefs and values
4. Belief in, connection to, and reliance upon something greater than oneself.
5. Fulfillment
6. Gratitude
7. Hope
8. Joy
9. Love
10. Meditation
11. Connection to Nature
12. Prayer
13. Relationship between spiritual health and physical health
14. Relationship with someone how can provide spiritual guidance
15. Serenity
16. Service
17. Spiritual Experiences
18. Spiritual Growth
19. Spiritual Writings

Correlating Values

1. Core Spirituality (Connection, meaning, faith, involvement, and experience)

Questions 1,2,3,4,5,6,8,9,12,13,14,15,16,18,19,20,22,23,24,25,26,27,28,29.

2. Spiritual Perspective/existential

Questions 2,7,11,18,21

3. Personal Application/humility

Questions 10,17

4. Acceptance /insight (i.e. insight into futility of focusing attention on things which cannot be changed.

Response to Spiritual Involvement Belief Scale Questionnaire-Pre Test

The response to questions addressing the core spirituality of participants at the beginning of the project revealed evidence that demonstrated that the majority was grounded in a core spiritual belief system. The evidence clearly revealed there was someone present who was neutral to the questions. There was a minimal response of disagreement to some questions. These responses revealed the perspective of six individuals who had a core belief with one mildly growing.

The response to questions addressing the Spiritual existential perspective revealed that the perspectives of the participants were ones of hope in times of despair. The responses revealed the fact that a relationship with a higher power is meaningful in times of hopelessness and offers help to love ones self.

The response to questions addressing the personal application and humility aspects of the participants revealed the individuals have had, previously to their present state of

being, spiritual experiences that generated renewing hope. A relevant factor that continues to be revealed is that one person seems to be very far away from any type of reconciliation with the healing process taking place in the group.

The response to the questions addressing acceptance and insight (i.e. Focusing attention on things which cannot be changed) revealed the majority of participants do not find serenity by accepting things as they are.

The data collected in the pre-test helps the writer to understand the basic core feelings of individuals in the group. The atmosphere and quality of the substance of the group was established. This provided the writer with some sense of direction as to how the group would proceed on the spiritual journey.

Data Collection Method Used

The data collection methodology used was an integrative process of information collected from the participants through pre and post test, story telling, journal writing, observation and assessment of verbal and non-verbal responses. The data collection method included a written agreement of confidentiality between the participant and the writer regarding the protection of their names, which prevented the exposure of personal information shared outside the group. The participants felt more comfortable in sharing their stories. The data collection method was done through an invitation to come into the church and enter into sacred space with God to evoke a spiritual faith journey which would result in healing of a “paralysis” of spirit, mind, and body from life-altering crises.

The data collection method is built upon a five step solution-focused methodology requiring a “change of perception”⁷ in the individual. The method encompasses listening to the story of the individual; establishing an empathetic relationship; establishing goals with a solution in mind, inviting and noticing change; developing means for continued healing and support.

Data Analysis Objectives

The objective of the data analysis was to examine the responses of individuals, which demonstrated whether movement toward healing was taking place in the lives of those suffering from a “paralysis” of spirit, mind, and body through life-altering crises. The model was established in the church community for people who are seeking healing and wholeness in their lives. The data analysis could help pastoral leaders to identify ways in which to help persons facing life-altering crises and trauma to see the possibilities of renewed hope. The pastoral leadership could hopefully become more sensitive to the needs of individuals beyond the traditional worship service. Therefore, by helping to create a sense of hope, encouragement, motivation, and inspiration in a deeper sense of spirituality, a change of perception to the presence of God was evoked in the person’s life.

The analysis of the data

The initial Interview Questionnaire (Appendix A) was an invitation for potential participants to develop a trusting relationship with a pastoral leader and share their story of hurt, pain, trauma, and loss, which has caused a “paralysis” of spirit, mind, and body. The participants expressed that state of being causing “paralysis” was due to issues of

⁷ Kornfeld, *Cultivating Wholeness*, 114.

divorce, death of a parent, changed lifestyle, loneliness, and intense health issues. These areas of concern are major life-altering changes that cause the individual to seek dependence upon or help from others for support and healing.

The participants experienced feelings of depression, fear, shaken faith, overwhelmingness, shock, anger, sadness, trauma, grief, quietness, and some physical pain. The participants yearned for hope in the following responses:

- Desired a better understanding of self
- Stronger faith
- Develop new friends
- Spiritual dilemma
- Need to talk about being “stuck”
- Get things off my chest
- Rid verbal emotional baggage
- Stop grieving and suffering
- Someone to talk to
- Need to share story
- A deeper sense of connection with God
- Stronger prayer life

A younger man who I initially talked to expressed how grateful he was to receive a call to be a participant because his mother had recently died unexpectedly and he comes to church for Sunday worship. He just sits and allows the tears to roll down his face. He expressed his gratefulness in having a sacred place to share his story of grief and to move toward healing.

The goal within the analysis of the data is “to hear the depth of the [individual’s] story’s impact in its original context.”⁸ The awareness to the writer was the initial silence that created itself in the room after the completion of the Spiritual Involvement and Belief Scale Questionnaire. The analysis formed from the responses of this scale was that the perspectives of six individuals demonstrated they each had a core belief, with one individual’s core belief carefully growing. The challenge to the writer was helping these persons to reconnect their spirit, mind, and body in ways that would generate renewed energy through the paralyzing effects of the crises that had occurred.

In the book, *Rehabilitation Nursing*, found in the medical libraries, Mary Ann Soliminé writes “crises or breakdowns occur when problems extend beyond a [person’s] capacity, persons and families need to make sense of their circumstances and to find meaning in daily events, relationships and life. Without intervention, the situation may lead to despair.”⁹

The first role is to be with the individuals in their healing as they discover wholeness. The group setting applied a spiritual component that created fellowship and helped persons to practice a feeling of the presence of God. A foundation was created for the group to begin sharing their stories and creating wholeness. The solution-focused method in establishing a relationship (step 1) is more akin to coaching and conversation, as the pastoral leader encourages participants to continue moving toward wholeness. A great awareness for the group was the acknowledgement of the healing process already taking place when each committed to being a participant. They were able to free

⁸ Boomershine, *Story Journey*, 109.

⁹ Mary Ann Solimine, “Spirituality” in *Rehabilitation Nursing: Process, Application and Outcomes*, 3rd ed., Shirley P. Hoeman, ed. (St. Louis, MO: Masby, 2002), 647.

themselves from some of the anxiety that was surfacing. They also were more conscious of how they were experiencing a “paralysis” of spirit, mind, and body. The difficulty of being able to talk about the “paralysis” was reflected in the inability to speak.

The goal of the leader was to “create an atmosphere in which the person feels understood and senses there might be a ‘fit’ with an understanding leader.”¹⁰ This established a cooperative working relationship.

The pastoral leader asked the question, “What brings you here?” People shared verbally their reasons for participating. Everyone noticed the group had something in common, that being community, with shared grief. After listening to the methodology chosen by the writer, a relationship was verbally established with agreement to move toward wholeness. At this time, there was no one who felt that they would not benefit from participating. The question that lingered was “how?” It was yet to be seen.

The second phase of the method focused on how to help begin with an end in mind. A goal is attainable no matter if the work is hard.

Charles, newly divorced from a 25-year marriage, shared that he did not feel guilty sharing his story with strangers. He stated that he knew God was blessing him just to be able to tell his story. Charles visualized seeing God sitting by him smiling, enjoying seeing him able to share and not be ashamed of who and what he is. He expects God to give him answers. He struggles with acceptance. Charles experienced a “paralysis” due to the intense lifestyle change of going through a divorce and coming out as a gay man.

He feels that God is ignoring him. Charles’ goal is to develop a more powerful spiritual life, learning to “let go and let God,” learning new movement toward wholeness.

¹⁰ Kornfeld, *Cultivating Wholeness*, 121.

When Charles first began the session, he had no idea what was going to happen. His end in mind was realizing that God had a plan for him that was yet to be revealed.

While listening emphatically to the stories, the writer realized her inner spirit was being touched. The writer began to make “sense” of the interconnectedness of the participants’ stories with her story in a total way, and not simply collecting data. It became a sense of “knowing.”

A.J. van den Blink, pastoral psychotherapist, seminary professor, and advisor of the writer says:

Emphatic relationships always occur in a context that is “the total environment in which we are and which is in us. Both you and the participant live in a context that is not outside of yourself; you are in it and it is in you.¹²

The writer became emerged in the process of hearing the stories of others, which caused personal feelings of pain and suffering to begin to surface. These feelings motivated the writer to be compassionate and empathetic to the participants.

The context involves relationships of work, class, gender, race, sexuality, culture, history and language. It is enhanced by the nature of one’s spiritual and communal experience. The experience which spiraled in the group created togetherness without discrimination to race, class or gender. Everyone listened with sensitivity and empathy to the others’ stories.

Dr. van den Blink says that when he wishes to be listened to with empathy:

What I want and need is for someone to take the time and trouble to discern the shape of my experience, the gestalt of what I have gone through or what I am struggling with and to help me understand it better. For in participating in that kind of respectful and caring exploration of my life or my issue or my problem, no

¹² Ibid., 55-56.

matter how difficult or painful, I feel affirmed in my humanity. I feel empowered and begin to understand myself better and am able to see and grasp things about myself that I have not seen or grasped before.¹³

During the group sessions, participants responded by telling their stories, which seemed to be generated by an energy that was evoking a heartfelt experience that gave voice to the story.

The story telling and journaling empowered the participants to gain a respectful and caring exploration of their lives. The data gained through verbal story telling and written inner feelings helped the participants to see and grasp things about themselves that had not been so obvious

The story of Gayle and the loss of her father addressed the end in mind. Gayle had to have a root canal on a very bad tooth. She was scared to death. She put off treatment for almost two years due to fear. This time, she thought about the pain her father went through, and no one would ever know how much he was suffering. He never complained about his health and all the treatments he went through. He was her superman. She has a flannel shirt that he wore all the time. Gayle calls it her superman shirt. This is what she wore to her root canal appointment. As much as she was scared, it reminded her of how trivial a root canal is compared to fighting cancer.

Gayle connected her “paralysis” to fear of the dentist and the lack of her father’s fear of dying of cancer. Gayle acknowledged the effort in attending the group meetings. The time to attend became difficult and painful and she wants to run toward denial—denial of the existing gut-wrenching pain. Gayle discovered there is no preparation for the

¹³A.J. Van den Blink, “Empathy Amid Diversity: Problems and Possibilities,” *Journal of Pastoral Theology* 3 (Summer 1993):1-14, citing Margaret Kornfeld, *Cultivating Wholeness: A Guide to Care and Counseling in Faith Communities* (New York: Continuum, 2001), 56.

kind of pain that death brings. Gayle decided to return to her previous counseling sessions. Gayle shared that the meetings made her realize she was putting her grief on hold. The effects were showing in her life, relationships, feeling empty inside, and the challenge to just get through the day.

Step three of the solution-focused methodology was to help the client toward solutions for change and movement from a paralyzed state of being. The data gathered from the stories of the participants demonstrated an automatic movement toward wholeness. This analysis was revealed through the journal writing. After the stories were told in-group, the participants were asked to write reflections and thoughts about their stories in their journals. They were asked to try to notice change before coming to the next meeting. The request to notice change “before”¹⁴ coming to the next session creates a context of improvement in the participants’ life. The powerful tool used in this analysis which gets to the heart of the individual’s “hope for change”¹⁵ is a “miracle question.”¹⁶ The miracle question is one which indicates a concrete movement from “paralysis” toward wholeness that can be noticed by the individual and others.

On the Want to Be Different, Change and Success Scale” (Appendix F) the results demonstrated everyone moving toward change. This data was affirmed through verbal discussions and observations after sacred space was created within the group. The pastoral leader left the room, with the hope to enhance individual sacred space. The group was able to experience individually a sacred space in which the presence of God could be experienced. After the pastoral leader returned to the room, the participants completed the

¹⁴ Kornfeld, *Cultivating Wholeness*, 127.

¹⁵ Ibid., 128.

¹⁶ Ibid.

success scale. They responded to the numbers five through 10, and the responses showed indications of clarity, of expectations toward solution-focused change and transformation.

Step four was a continuation from step three in that it continues the flow of how to construct interventions that invite and facilitate change. The intervention of creating sacred space also gives credence to the revelation of how persons in the group are connecting to a deeper sense of spirituality. When a deepening of the spirituality or spiritual life of an individual takes place, it “reflects the force of the spirit giving wholeness of selves, meaning and purpose, and a unity of “innerness,” “connectedness,” or “interconnectedness.””¹⁷ A path of quiet contemplation takes place and the person begins to communicate with God. Through a deeper sense of prayer, harmony is drawn to the “paralyzing” effects of trauma on the spirit, mind, and body. The harmony begins to evoke a flavor of peace with snippets of renewing energy moving from the “paralysis.”

The analytical data presented through verbal and written responses in the participant’s journals revealed a desire to have more continued prayer time and a special sacred place creating space for reflection through journaling. A response from Toni who was experiencing the “paralyzing” effects of loneliness indicated a personal need to journal more often and a desire for more continued prayer time. This process would help her to turn the problem or situation over to God and let God handle it in God’s way.

The verbal observations also were interventions of scriptural readings from the Bible. There were participants who indicated they do not read the scriptures, the Word of God, but revealed a desire to do so.

¹⁷ Solimine, “Spirituality” in *Rehabilitation Nursing*, 147.

Step five indicated movement toward a continuance of noticing change. The analytical data provided indicated that the participants within the project have demonstrated that the methodology evoked movement toward a renewed energy of healing. The heart of the matter is not only movement generated through story telling, journaling, and prayer, but a feeling of a sense of renewed energy in their soul. The intensity of the movement would cause the participant to feel a change in attitude and outlook on life, knowing and believing that only God could have touched their lives to renew their spirit.

The analysis of the data indicates the continued need to obtain a spiritual support system through fellowship with others to help prevent a state of “paralysis” when confronted with a traumatic crisis. One of the most sacred and holy places to obtain this type of relationship is the church. The church is the place where each participant was found, indicating the degree of grief which is lying dormant in the hearts of parishioners. The analysis of the data demonstrated the intensity of individuals suffering buried in the depths of their soul. The analysis demonstrated that people can find renewed energy and hope in the sharing of personal stories within a group setting that has sacred space. The analysis showed people are more apt to reveal intricate pieces of themselves when trusting relationships are established. The analysis demonstrated the vulnerability of individuals, therefore, creating a willingness to accept healing and God into their lives.

The book of Isaiah shows that this powerful God, who the participants are experiencing a greater movement toward, is One who helps those who rely on Him. This God gives power to those who are faint and strength to the powerless. These words reveal through Isaiah 40: 28-31:

Have you not known?
 Have you not heard?
 The Lord is the everlasting God,
 The Creator of the ends of the earth
 He does not faint or grow weary;
 His understanding is unsearchable.
 He gives power to the faint,
 And strengthens the powerless
 Even youth will faint
 And be weary, and the
 Young will fall exhausted
 But those who wait for the Lord
 Shall renew their strength,
 They shall mount up with wings like eagles,
 They shall run and not be weary,
 They shall walk and not faint.”¹⁸

A feeling might be put out of a person’s mind, but it cannot be put out of the body and heart. The energy from the suppressed feelings is trapped in the stomach, throat, chest and spine. The energy of the trapped emotional reactions stays alive in the body, causing pain and illness. The gift of story telling and journaling becomes acts of prayer. These acts of prayer are results of the model created by the writer, to generate wholeness well-being and renewed energy, from “paralysis” of spirit, mind, and body.

The end results are expressed through the comments of the participants:

End results revealed from the Posttest Spiritual Involvement and Beliefs Scale

- Attending this workshop is making acceptance easier by putting faith in God more in the forefront of my thinking.
- A place to start healing from some of the issues of my life.
- Needed the group at the end of the week to get some things off my chest
- Revealed different sides of myself.
- Was able to sleep better

¹⁸ Isaiah, 40: 28-31 NRSV

- Gained a calmness and accepting attitude
- Increased feelings of closeness to God
- Believes God answers prayers in time
- Realization that journaling brings a peace of mind
- Believes that God truly hears and answers prayers.
- Pray to never lose the feeling of closeness to God attained.
- Deeper and more intense prayers.
- Acknowledgements of thanking God for assistance with physical and emotional recovery.
- Gained renewed energy from hearing others story.
- Wished group could go on forever
- Miss the gathering for support
- God did not bring me this far to desert me now.
- Lifted burden from my heart I had not been able to share.
- A feeling of new beginning.

The words of participants radiate through the life of the project bringing light to the hearts that matter. The following words are from Gayle whose father passed away.

Where Do I Put This Anger

That is what I am working
on now. I don't think
the answers will be coming soon.
But I will continue this journey.
This grief journey of healing
that the class reminded me
that must take place.
So that I may be myself again and
still miss my dad. So that
I at times can be reminded

of his presence-and at the same time not crush me for the rest of the week.

So that I can be a happy soul again for myself, my family, and especially for my son.

The journey is never ending until one day!!

The posttest Spiritual Involvement and Belief Scale Questionnaire (Appendix G)

revealed the deepening of a stronger spirituality and belief system. Participants reconnected with a support system, friends, church, community, and more counseling. Participants had a more zealous, yet humbling spirit in knowing they could move from a state of mind of hopeless to hope, with the continued grace and mercy of God upon their lives. Participants re-established broken family relationships. Participants found growth and renewed energy through hearing and telling stories without shame, guilt, or judgment. Participants engaged a change of perception of their personhood and their lives, breathing in movement toward wholeness and well-being, through a spiritual transformative journey.

The intertwining of the pre and post test revealing the levels of spirituality in each participant created new insights and new perceptions about themselves. The level of consciousness that was elevated through individuals answering the questions of the pre and posttest generated an in-depth awareness of the need to do something different. “Do I want to change or remain the same?” was the question. The questions elevated awareness evoking a desire in the depths of the participant’s souls unknowingly to change and experience renewed energy, change, and transformation. There was no opportunity to turn back. The energy was moving forward. The soul-stirring moments of reflecting on the questions created a desire of wholeness and well-being. Transformation began to take place in the interweaving of the heart, spirit, mind, body, and soul.

CHAPTER SIX

REFLECTION, SUMMARY, AND CONCLUSION

This chapter will discuss the writer's reflections on the field experience, a summary, and conclusion for the ministry model.

Reflection of the Writer

The greatest insight of the writer to the field experience was the awareness of the place where sacred space was created for the individual to receive healing and renewed energy. The sacred space was created at a pivotal point of the spiritual journey when the participants were left alone in the room after the leader exited and left them to find their space with God. The essence of the sacred space was the space created within the space of the room for each person when they found themselves alone with God on their personal spiritual journey. The experience generates an individual relationship and experience with God creating renewed energy, change, and transformation providing an illuminating light of hope in the midst of hopelessness. This experience creates movement toward wholeness.

The next insight of the writer to the field experience is that the clergy or lay person can only offer the opportunity to embark upon a transformative faith journey to people who are willing to seek healing and transformation, bringing new perceptions to their lives.

There are challenges to confront along the path way. Unexpected circumstances are presented which challenge the very being of a person, during the journey and unveiling of suffering. One can never assume that the journey will be easy. The power of the journey embraces illness, suffering, celebration, humility, vulnerability, and sometimes death.

The opportunity for spiritual transforming healing begins with the willingness to have an open heart. The touch of God's finger tips upon the heart awakens it unknowingly to the person. The connection has not been made in the psychological aura of the person. The inability to cope with the life-altering crises evokes a desire for something different which improves the everyday feelings of hopelessness. The alternatives are many: drugs, sex, walking, reading, swimming, sleeping, and talking to a therapist.

The ultimate alternative becomes the reality of the Spirit of God needed as a therapeutic spiritual drug; renewing breathing the breath of life, and reviving to bring awareness to renewed energy of healing and hope taking place.

The mercy and grace of God is the yearning and longing of the soul. The crying out and feelings of despair takeover the inner being which becomes the driving force of the everyday life.

The effects of trauma do not have a specific direction as to how each person will be affected. But, it does take on a life of its own until it exhausts itself. The emotional and physical aspects of the human being are affected.

The arms of God are so vast in openness that God is willing to accept us under any condition. God is God our all in all so long as we are open to receive God. God wants people to know how much they are loved and cared for. Until trauma happens, many people do not know the intensity of God's love. Even then, the trauma is so overwhelming the person turns away or forgets. But God never forgets. God is always there waiting with

an extended hand and open arms to receive us as we are. Yes! Yes! Yes! It is now that we become vulnerable and surrender to God's healing touch. We are ready to receive the miracle of healing which only God can give. The first question we ask ourselves is "What took me so long?" Why didn't I see this before?" The writer has learned that we just weren't ready because of the overwhelming "paralysis" of the life-altering crisis.

The project revealed many of the participants were having difficulty trying to make sense out of those traumatic life-altering crises they had experienced. The "paralysis" of spirit, mind, and body had embodied the ability to focus and concentrate on healing. The data revealed in the journal writings showed the innermost feelings of the participant to find a way to connect with God, because, God heals. The journal writings seem to have become an unspoken plea for help and a desire for renewed energy to create change. A participant was appreciative of the opportunity to have a safe place through journal writing in the project to reveal his pain and suffering in his illness of AIDS, yet, gratefulness to God for grace and mercy. The participants had tried to find alternative ways to move from their "paralysis" in hopes of finding healing and renewed hope. One of the participants had started counseling and stopped. Another participant had closed all the curtains of the windows in her home to isolate herself from others to free her of pain and hopelessness. The project has provided substantial data demonstrating that people who are suffering from the "paralysis" of spirit, mind, and body through life-altering crisis are seeking ways to feel renewed energy and hope through a spiritual journey. The qualitative data revealed in the study that participants seek ways to embark upon a spiritual journey to reconnect their lives with God because God heals. The participants are in hope that someone will extend a helping hand with directions on how to begin the journey.

The alternatives which the writer chose to embrace due to “paralysis” in life-altering crises of specifically divorce and death were: working several jobs; becoming overly involved with her children, becoming a life long learner in education, and maintaining a continued life in the church. These things were all a temporary “fix.” The effects of the “paralysis” were burning in the heart, soul, mind, spirit and body. The debilitating effects had taken over and had begun to manifest it unconsciously. Yet, snippets of concern were readily conscious. Due to the sustaining faith of the life of the writer, the continued managing of her “paralysis” became a way of life.

The inner being of the writer had become weak and exhausted giving rise to exhaustion of the outer person. Yet, the outer person forged ahead. Finally one day, the writer found herself facing death.

The experience of what was thought to be an asthma attack was actually a double pulmonary embolism. The words echoed through the emergency room as the doctors and staff gathered to say, “We have some very bad news. The situation does not look good. Your lungs are collapsing and are filled with two large blood clots with multiple small ones. You are dying. We cannot promise you will even make it through the night; there are so many blood clots. You have been walking around with this condition for at least a week and we do not have any idea why you are not dead. But, you are not, and we will do everything possible to save you. The writer knew only God could save her. There are no promises. You are dying and it does not look good. It is time to call your family and pastor.”¹

¹ The words of the writer are from the emergency room staff at Upper Valley Medical Center during the Clinical Pastoral education Year Long Residency Program.

The memory of fading away to a far off distance still lingers with the writer. The presence of God was with the writer in the distance. The writer remembers telling God she was not afraid. She knew He would never leave her. The writer remembers God traveling with her on a spiritual faith journey letting her know everything would be okay. The writer knows that it was only God who carried her. The writer realized that it was the blood of Jesus which was shed that gave the blessing of healing.

Ironically, the Christian belief system developed over the years was instilled in the soul of the writer from a child. A new life of renewed energy and transformation revealed the depth of her Christian belief system. The blood clots in the lungs became a metaphor for the blood of Jesus which Jesus shed for all people.

The blood which flowed through the body of the writer was cleansed and renewed by the Spirit of God, bringing healing to the “paralysis” of the spirit, mind, and body which was traumatized with suffering. The words and spirit-filled music of Andre Crouch epitomize the essence of the healing powers of the blood of Jesus:

“The Blood Will Never Lose Its Power”

The blood that Jesus shed for me
 Way back on Calvary;
 The blood that gives me strength from day to day,
 It will never lose its power. It reaches to the highest mountain
 It flows to the lowest valley.
 The blood that gives me strength from day to day,
 It will never lose its power.”²

The resurrection of Jesus Christ brings new hope and new life during suffering. Jesus died on the cross. Jesus rose from the dead. Jesus healed the sick. The antiquities of the Christian past in history bring hope to those who linger in hopelessness. The matters of

² Andre Crouch (1945). Words and Music: “The Blood Will Never Lose Its Power” (Valencia, CA: Manna Music, Inc., 1966) The Baptist Hymnal.

the heart lie in the heart of God. God knows when a light can be manifested in the heart of a person.

The grappling heart of an individual becomes humbled by the desire to hear words from God. The model of the writer offers a continued spiritual faith journey toward change, new perceptions, and transformation for ministers to use in the church community.

Reflections on the Field Experience

Along the pathway to change and transformation God speaks to everyone. The words of God guide the journey through the hearts of each person as the stories are told, tears are shed, hearts are opened, relationships are created, and people are saved.

The implementation of the ministry model took place during the winter months of the year. The weather conditions had a great effect on travel. This particular winter was described to have been the worst in thirty years. Although people find the church as a safe haven, there was difficulty in arriving on time or attending meetings consistently each week. The initial time frame for the meetings was four weeks. The implementation and process of the model continued for seven weeks. The seven-week time frame became an effective tool for the spiritual journey of each person. The group consisted of seven persons. The meetings were held once a week. The initial meeting was everyone experiencing moments of anxiety, silence, sharing of names and what brought them to the group. The feelings of vulnerability were throughout the sacred space created in the room. Yet, there was the closed door for privacy and confidentiality with a beautiful décor. The sacred space created became a holy place.

The writer introduced the ministry model to the group and the solution-focused method used to create a spiritual faith journey through “paralysis” of spirit mind and body. The goal of the solution focused model by Insoo Kim Berg and Steve de Shazer and their colleagues was to inspire the person to talk with others creating relationship which helps people to continue to move forward; focus on healing by creating a healthy outlook and end in mind. Also, to orient the person toward focusing on change and experience creating new solutions toward healing; helping the person to embrace a change of perceptions with appropriate interventions of developing trust and feeling understood. Finally, to focus on change bringing awareness to snippets of miracles of healing and positive changes and embracing God’s love and movement toward wholeness.

The writer provided a pre and post-test used as a spiritual tool to obtain the initial view and ending view of each participant about their spiritual life.

The flow of the ministry model began with the writer listening to the stories of the individuals as they surfaced each week. The stories took on a life of their own, generating something in the next person, which evoked the creation of relationships.

The writer became aware of a step that was not realized at the beginning of the project. Due to the intensity of emotions shared in some of the stories, there became a need to refer an individual to an outside resource because of the intensity of further care needed beyond the group. The initial step in approaching people’s lives would be to have information for other resources available if a referral action needs to take place.

The ability of the writer to listen to the stories was effective for the group. The writer incorporated a silent tool used for the participants as the stories were told. The writer provided two crystal bowls which were present to place the sorrows the person may feel and the joys they feel written on a piece of paper. One response was “I feel like a

heavy load was lifted off of me.” The individuals began to display greater trust toward the writer and the group.

The writer provided a journal for the participants to write what was too overwhelming to say and their reflections. The journals were taken home and returned each meeting. The journal evoked the participants’ deeper feelings as they orally expressed them during the journey. The writer’s deepest awareness of the participants’ feelings was through the reading of the journals. The writer experienced great heartfelt compassion toward each person. The things stated in the journals were not always said in the telling of the story. The experience became soul revealing of each person. The writer’s heart was extremely touched.

The initial responses of individuals were concerns for feeling God’s presence and love during their times of despair. There were references to, where is God? The individuals who believed God to be at a distance began to acknowledge the reality of God in their lives but also, through their story telling, wanted God to stop the suffering.

The use of a wooden carved Indian chest was given to each person with a natural shaped stone and a carved heart inside. The chest represented a safe place where personal things can be placed, which represented healing. The heart inside the chest represented the love of God and the love of others who share in our concerns and needs of care. The stone represented the foundation of the basis of a spiritual life embraced, the faith community—the church. The foundation is God’s Church and the Cross upon which Jesus Christ died. The cornerstone is Jesus who said in Matthew 16:18:

“. . . on this rock I will build my church”³

³ Matthew 16:18 NRSV

The writer's personal experience reveals healing takes place in God's time. The spiritual tools used in the ministry model were present to evoke feelings and thoughts of renewed energy. The continued use of water throughout the group sessions represented clarity through the releasing of tears. The water stimulates thoughts of cleansing and evokes tears of loss and renewed hope to see God's miracles of healing in the participants' lives.

The participants of the ministry model were greatly challenged along with the writer on the spiritual faith journey. The writer was greatly challenged as to what could be done differently to ease the suffering of the "paralysis" as stories unfold. The revelation to this question is to set aside significant time to incorporate the stories of healing by Jesus Christ.

The reflection of the writer on the field experience reveals individual's perceptions of their lives were changed through story telling, listening, journal writing, relationships, prayer, tears, and renewed energy. The creation of renewed energy evoked renewed hope and healing. The participants were pleased to share snippets of healing and renewed energy.

The writer was also given a sacred and holy place to lay down the burdens of her heart. The writer found it difficult to be reminded of the intensity of her personal pain. But her awareness of snippets of healing miracles already taking place helped to sustain her spiritual faith journey. The writer was changed through the experience of the ministry model. A change began to take place in the spirit of the writer, which spoke to her soul. The hallelujah awareness for the writer was while she had extended herself to create sacred space for others to receive healing in their lives by telling their stories, the writer became aware that God was listening to her story from the spirit of her heart, mind, and

body, which did not have to be said aloud. The hand of God was upon the writer, bringing renewed energy and transformation. The writer, through this experience, had surrendered her complete life broken and transformed to God.

A Restatement of the Final Document

A good understanding of the model comes with the following insights ascertained by the writer:

- People are fearful when they come into spiritual transforming counseling
- Some persons do not stay because of fear of opening up themselves and having to face their fears and pain.
- People will share the underlying reason as to what brought them to spiritual counseling after they are in the group or one on one.
- People will initially share what they want to reveal as being the “paralysis” issue when there is something deeper not being revealed.

The heart of the model is to bring awareness to people suffering in “paralysis” to a point of opening their hearts to let God come in. The writer learned from the participants of the project how to open her heart and let God come in once again fully and completely through connecting with other persons who are seeking wholeness. The writer learned the true value of being able to listen to the stories of others and the value of owning and telling your own personal story. The writer learned from the participants that the intensity of pain and suffering can create hopelessness no matter how strong of a person you may be or how strong ones faith is. The “paralysis” of spirit, mind, and body is caused by life-altering crisis, which brings about a life change, renewed hope, and transformation.

The writer expresses the pure infinite wisdom found in the creation of the model: It is unfair to disclaim the presence of the church during a “paralyzing” situation. The writer expresses that the essence of the church and God’s love is in the hearts of people. It is in her heart. It is the opening of our hearts to receive the blessings of healing and God’s love that is found in the heart of the church. God anointed the transformation of the writer. The project was a gift from God. The participants were “snippets of miracles” revealed by God in the project. The model reveals that trauma comes at different times of people’s lives and in different ways. The value of the project shows the importance of having a spiritual foundation and spiritual community to help the individual through the process of finding healing toward a state of wholeness and well-being during change and transformation.

Oriah Mountain Dreamer summarizes the context of the ministry model:

Once you recognize within yourself a hunger for something beyond just continuing, once you taste even the possibility of touching the meaning enfolded in your life, you can never be completely content with just going through the emotions. There is no going back. Learning cannot be undone. The wisdom touched in moments of real intimacy penetrates the soul with knowledge of whom and what we are. It transforms us.⁴

⁴ Dreamer, *The Invitation*, 7.

APPENDIX A
INTERVIEW QUESTIONNAIRE

January 5, 2003

Doctor of Ministry Degree Project – Interview Questionnaire

Transformative Faith Journey: A Model for Healing

Paralysis of Spirit, Mind, and Body in Church and Community

1. If you were able to take a trip today where would you go?
2. What have been the most traumatic life altering crises in your life in the past year?
3. How did this affect you...leave job, move away, shock, dismay?
4. How did it make you fell...sad, happy, depressed, stuck?
5. What is the most meaningful thing you have done in your life recently?
6. Do you have courage?
7. Do you see God in your life?
8. Do you pray
9. When was the last time you prayed?
10. Does praying make you fell better?
11. Do you believe in miracles?
12. Do you have any type of support system?
13. Do you fell or think the very foundation of your life has been shaken?
14. Do you have faith the grain of a mustard seed?
15. What is the happiest moment in your life in the past year?
16. Are you under a doctor's care?
17. Do you take any medication?
18. Do you feel safe?
19. Do you think you could trust me?
20. Would you like to try to experience a transformative faith journey for healing of paralysis of Spirit, Mind, and Body to promote change and well being in your life from a life altering crises?

This questionnaire is confidential.

APPENDIX B
CONFIDENTIALITY AGREEMENT

Confidentiality Agreement

Security and Confidentiality is a matter of concern for all persons who have access to the research of this project. Each person accessing this project data and resources holds a position of trust relative to the information and must recognize the responsibilities entrusted in preserving the security and confidentiality of this information.

Therefore, all persons agreeing to be a part of this research project or through personal observation must read and comply with the confidentiality and security policies of the research project, church, and seminary.

1. I will not disclose, commit to memory, or use anyone's information other than my own.
2. I understand that the information shared will only be disclosed to those authorized to receive it for the research project.
3. I will respect the confidentiality of others.
4. I understand that, if I violate the terms of this agreement, I will not be able to continue in the project.

Name

Date

Witness

APPENDIX C
CODE OF ETHICS AGREEMENT

CODE OF ETHICS AGREEMENT

In accordance with church and seminary policy, all persons must abide by the highest ethical standards of behavior and practice in order to ensure that Quality of Care is provided that upholds the dignity of all individuals.

If an individual believes that they are facing a situation that has ethical implications, they will seek guidance from their leadership.

This Code of Ethics is designed merely to enhance awareness of issues within the project research

1. Respect the integrity of each person.
2. Acknowledge the confidential nature of relationships professionally.
3. Commit to the project and its success.

Name

Date

Witness

APPENDIX D
INFORMATION RELEASE FORM

Information Release Agreement

In my effort to respect your right to privacy, I ask that you complete this form regarding release of information. By checking the appropriate box and signing each statement, you will ensure that the church clearly understands and complies with your intentions regarding release of information to the clergy. Should you choose to release information to the clergy, Senior Pastor, only the fact that you have been a part of this research will be provided.

I _____, agree to participate in the research project. By doing this, I understand that the information obtained will be used for research only without the use of my name or other identifying markers.

- DO NOT release my information to the clergy.
- Do release my information to the clergy.
- Do release my information for the research without the use of my name and identity.

Signature

Date

Thank you,

APPENDIX E
PRE TEST SPIRITUAL INVOLVEMENT AND BELIEFS SCALE

January 22, 2003

Doctor of Ministry Degree Project

Joyce M. Williams

Pretest

Spiritual Involvement and Beliefs Scale

Revised (SIBS-R) (Hatch, et al, University of Florida)

Revised (SIBS-R) (Williams, Doctor of Ministry Program with permission of Hatch)

How strongly do you agree with the following statements? Please circle your response.

Strongly Agree (7), Agree (6), Mildly Agree (5), Neutral (4), Mildly Disagree (3), Disagree (2), Strongly Disagree (1)

1. I set aside time for meditation and /or self reflection	7 6 5 4 3 2 1
2. I can find meaning in times of hardship	7 6 5 4 3 2 1
3. A person can be fulfilled without pursuing an active spiritual life	7 6 5 4 3 2 1
4. I find serenity by accepting things as they are done	7 6 5 4 3 2 1
5. I have a relationship with someone I can turn to for spiritual guidance	7 6 5 4 3 2 1
6. Prayers do not really change what happens.	7 6 5 4 3 2 1
7. In times of despair, I can find little reason to hope	7 6 5 4 3 2 1
8. I have a personal relationship with a power greater than myself.	7 6 5 4 3 2 1
9. I have had a spiritual experience that greatly changed my life.	7 6 5 4 3 2 1
10. I have had a spiritual experience that changed my life in a renewing and transforming way.	7 6 5 4 3 2 1
11. I have had a spiritual experience that changed my life in a negative way.	7 6 5 4 3 2 1
12. When I help others I expect nothing in return.	7 6 5 4 3 2 1
13. I don't take time to appreciate nature.	7 6 5 4 3 2 1
14. I don't take time to appreciate myself.	7 6 5 4 3 2 1
15. I do take time to appreciate myself.	7 6 5 4 3 2 1
16. I have joy in my life because of my spirituality.	7 6 5 4 3 2 1
17. I have joy in my life.	7 6 5 4 3 2 1
18. My relationship with a higher power helps me love myself.	7 6 5 4 3 2 1
19. My relationship with a higher power helps me love others more completely.	7 6 5 4 3 2 1
20. Spiritual writings help enrich my life	7 6 5 4 3 2 1
21. I have experienced healing after prayer.	7 6 5 4 3 2 1
22. I have experienced peaceful fillings after prayer.	7 6 5 4 3 2 1
23. My spiritual understanding continues to grow.	7 6 5 4 3 2 1
24. I focus on what needs to be changed in me, not what needs to be changed in others.	7 6 5 4 3 2 1

25. In difficult times, I am still grateful. 7 6 5 4 3 2 1
26. I have been through a time of suffering that led to spiritual growth. 7 6 5 4 3 2 1
27. I solve my problems without using spiritual resources. 7 6 5 4 3 2 1
28. I examine my actions to see if they reflect my values. 7 6 5 4 3 2 1

29. How spiritual a person do you consider yourself? (with "7" being the most spiritual.)

7 6 5 4 3 2 1

APPENDIX F

WANT TO BE DIFFERENT, CHANGE, AND SUCCESS SCALE

Want to Be Different, Change, and Success Scale

1. On a scale of zero to ten, where zero is when the situation was at its worst and ten being the day after the miracle (change-even the smallest), how close are you to ten today?

1 2 3 4 5 6 7 8 9 10

2. On that scale then, if you are presently at a three, what will be happening when you are at a four, what will you (and others) be doing?

1 2 3 4 5 6 7 8 9 10

3. On a slightly different scale, from zero to ten, where ten is that you will do almost anything to achieve these goals (or solve this problem) and zero is that you will nearly give up and sit still, where would you say you are on that scale?

1 2 3 4 5 6 7 8 9 10

4. Is there anything else that I haven't asked about that you think I should know before I take a break and think about our session in silence and prayer?

APPENDIX G
POST TEST SPIRITUAL INVOLVEMENT AND BELIEFS SCALE
QUESTIONNAIRE

January 22, 2003

Doctor of Ministry Degree Project

Joyce M. Williams

Posttest

Spiritual Involvement and Beliefs Scale

Revised (SIBS-R) (Hatch, et al, University of Florida)

Revised (SIBS-R) (Williams, Doctor of Ministry Program with permission of Hatch)

1. If you were able to take a trip today where would you go?
2. What is the most meaningful thing you have done in your life recently?
3. Where do you see God in your life?
4. Do you pray?
5. When was the last time you prayed?
6. Does praying make you feel better?
7. Do you believe in miracles?
8. Do you have any type of support system?
9. Do you have faith—the grain of a mustard seed?
10. Has your faith changed, grown, stayed the same, or lessened in your life during your time with the group project?
11. In what ways has the project affected your faith journey?
12. Was your initial expected goal met in this group?
13. While being a participant in the group do you believe or feel there is movement toward accomplishing your goal?
14. Do you feel a change or transforming of healing or paralysis(being stuck in emotions) of spirit, mind, and body has begun to take place in you that others will see in church and community?
15. What is the happiest moment in your life in the past two months?
16. Have you begun to experience “new hope” for your life while participating in this group?

17. What has to be different in your life that will tell you that coming to this group was a good idea?
18. Did what you expect to happen in this group happen/meet your expectations?
19. Imagine yourself six months or so in the future, after we have finished working together and have or attempted to achieve the goal that brought you into the group; what do you hope to be different in your life that will tell you the goal was achieved?

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